27			1	
CERTIFICATE OF		FILED EFFE		
ASSUMED BUSINESS NAME			CIVE	
Pursuant to Section 53-504, Idaho Code,				
submits for filing a certificate of Assumed	me. C4	AM 8: 52		
Please type or print legibly. SECRETARY OF a			OF OTA	
NOTE: See instructions on reverse bef	STATE OF	IDAHO		
1. The assumed business name which the u	ndersigned			
business is:				
THE GREEN.	HOUSI	5		
	<u>, , , , , , , , , , , , , , , , , , , </u>	••••••••••••••••••••••••••••••••••••••		
2. The true name(s) and business address(e		tity or Individual(s) doing		
business under the assumed business na	me:			
Name	0	Complete Address		
CURTES POLLEY	SUSE.	PINEALE COALI	D-838	
		· ·		
		· · · · · · · · · · · · · · · · · · ·		
3. The general type of business transacted u	inder the as	sumed business name is:		
Retail Trade Transportation	n and Publ	ic Utilities	·	
Wholesale Trade Construction				
Services Agriculture	' r		┓	
		Submit Certificate of		
Manufacturing Mining	ŀ	Assumed Business Name and \$25.00 fee to:		
Finance, Insurance, and Real Estate	9			
4. The name and address to which future		Idaho Secretary of State 450 N 4th Street		
correspondence should be addressed:		PO Box 83720		
CURTES POLLEY		Boise ID 83720-0080		
805 E. PENE ALE		(208) 334-2301		
COEVRIALENCE, T.D. 83814	e l	• • • • • • •		
WEURIALENE, W. 8 JOIT				
5. Name and address for this acknowledgm	nent			
COPY IS (if other than #4 above).				
		Secretary of State use only		
	990 ·			
Signature:				
(signature Rouired)	to to			
Printed Name: CURTES FOLLEY				
Capacity/Title: <u>OWNUM</u>	s duos	IDAHO SECRET		
(see Instruction # 8 on back of form)	6	03/24/201 CK: 1100 4/201	RY OF STATE	
		1 8 25.80 = 25.8	10 BH: 11061PA	
			MSSUN NAME # 2	
		D12022	ろ	
		de l'Lith		