

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

## **FILED EFFECTIVE**

D170256

2014 APR -7 AM 9: 38

## Please type or print legibly. Instructions are included on back of application.

	Instructions are included on back of appli	SEQUENTIAL STATE
1.	The assumed business name which the under business is:	
	Clean Green La	wn Care
2.	The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Benjamin Beau Hobson 2	the state of the s
3.	The general type of business transacted und  Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed:  Beau Hobson  208 North 5th St. West  Paul, ID 83347	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above).	
0.	No elles	Secretary of State use only
-	ature:	
	ed Name: Benjamin Beau Hobson	
•	icity/Title: <u>6W nev</u>	IDAHO SECRETARY OF STATE
Signature: Printed Name: Canacity/Title:		04/07/2014 05:00 CK: 1691 CT: 295276 BH: 1418883
		1 0 25.00 = 25.00 ASSUM NAME # 2