



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

2012 JUN -4 AM 9:21

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Kenrich LAWN CARE

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Richard J Dunn</u>	<u>1040 W. Hwy 26</u>
<u>KAMBER DUNN</u>	<u>BLACKFOOT ID 83221</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Richard J Dunn
1040 W. Hwy 26
BLACKFOOT, ID 83221

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 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):

Signature: K Dunn
(signature required)

Printed Name: KAMBER DUNN

Capacity/Title: _____

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\formstatn forms\labn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
06/05/2012 05:00
CK: 25142033 CT: 271106 BH: 1326871
1 @ 25.00 = 25.00 ASSUM NAME # 2

D156014