

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

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## Please type or print legibly. NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The assumed business name which the under business is:	ersigned use(s) in the transaction of
Tucker Landscoping	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name <u>Name</u>	
Thetail Hade	ler the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Phone number (optional):  (308) 412-0861
	Secretary of State use only
Signature:  Printed Name: Tool Riley  Capacity/Title: Quinter	IDAHO SECRETARY OF STATE  97/29/2004 05:00  CK: CASH CT: 158018 BH: 758184  1 0 25.00 = 25.00 ASSUM NAME # 2