FILED EFFECTIVE



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

2014 APR -4 AM 11: 24

SECRETARY OF HATE

		rtificate of Assumed Busi		STATE OF ID.		
Instruc		or print legibly. led on back of applic	ation.			
1. The assumed business name which the undersigned use(s) in the transaction of business is:  Abide in the Vive Lawncare						
2. The true rebusiness	name(s) and buunder the assu  Name  V. Tau  Case	siness address(es) omed business name:	Comp Zollo May	lete Address	<u>ewi</u> ston I m 10	
Ref	3. The general type of business transacted under the assumed business name is:  Retail Trade Transportation and Public Utilities  Wholesale Trade Construction Services Agriculture Manufacturing Mining Submit Certificate of Assumed Business Name and \$25.00 fee to:					
4. The name and address to which future correspondence should be addressed:  Some Taylor  Some Mayfair riche  Lewiston TD 83501			450 PO Bols	retary of State North 4th Street Box 83720 se ID 83720-0080 334-2301		
	d address for til other than # 4 above):	nis acknowledgment				
Signature:  Printed Name: Capacity/Title:		Taylor		Secretary of State use only		
Signature: <i>C</i>	my coe					

IDAHO SECRETARY OF STATE

94/94/2014 95:99

CK: 1788858 CT: 172099 BH: 1418653
1 8 25.88 = 25.88 ASSUM NAME # 2

170221

8/21/2012

Printed Name: <u>Cody</u>

Capacity/Title: CO - ON WULL

8bn pred Rev. 07/2010