

Capacity/Title:

(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.

J FEB 16 Pil 1: 44

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

SECHL STATE STATE OF IDAHO

The assumed business name which the undersigne business is: La R Landscapena	
2. The true name(s) and <u>business</u> address(es) of the obsciness under the assumed business name: Name Leopoldo Duan Sinzon 5015 Cold	Complete Address
3. The general type of business transacted under the an example of the services and the services are appropriately appropriately and the services are appropriately appropriately and the services are appropriately	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (95-49)98 Secretary of State use only
Signature: 10 20/50 2000 50 50 50 50 50 50 50 50 50 50 50 50	IDANO SECRETARY OF STATE 02/16/2005 05:00 CK: CASH CT: 158018 RM: 793885

02/16/2005 05:00 CK: CASH CT: 156010 DH: 793585 1 0 25:00 = 25:00 ASSUM MARE 12

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