

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.

2004-00T-4 AM 9: 15

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: TREE Service ———————————————————————————————————	
2. The true name(s) and business address(es) of the e business under the assumed business name: Name Tom WilliamSon DE	ntity or individual(s) doing Complete Address E. H.D. S. Burley ID. 83318
3. The general type of business transacted under the a Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: HELDOS	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 308-678-4607
	Secretary of State use only
Signature: (signature required) Printed Name: Tom Williamso Capacity/Title: OVDER	D80020
Capacity/Title: OVER (see instruction #8 on back of form)	10/04/2004 05:00 CK: 816654322 CT: 158818 BH: 769212 1 8 25.88 = 25.88 ASSUM NAME # 2