

Capacity/Title: <u>OUNER</u>

(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.

2006 APR 17 AM 10: 35

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

CEADETAINS OF STATE

1. The assumed business name which the undersigned business is:  PARK VIEW SERVICE	• •
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Ron Holland 618	entity or individual(s) doing  Complete Address  E 14th Ave Post F-Alls Id  87854
3. The general type of business transacted under the  Retail Trade Transportation and Put Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:	
RON HOLLAND  618 E. 14th  Post FAIIS, Id 83854  5. Name and address for this acknowledgment	Boise ID 83720-0080 208 334-2301 Phone number (optional):
COPY IS (if other than # 4 above):	Secretary of State use only
Signature: Ron Holland  Printed Name: Ron Holland  Occupation of the Company of t	IDAHO SECRETARY OF STATE  94/17/2006 05:00  CK: 6409 CT: 158010 BH: 949560  1 0 25.00 = 25.00 ASSUM NAME #