CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) SECRETARY OF STATE, STATE OF IDAGE Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant to Section 53-504, Idaho Code, Idaho Co To the SECRETARY OF STATE. STATE OF IDAHO 1. The assumed business name which the undersigned uses business is: Sunrise Lawn Care 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name 5633 Sites Drive, Boise, ID 83705 David L. Guzzetti 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Wholesale Trade Agriculture Services Construction Mining 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: David Guzzetti Submit Certificate of Assumed Business 5633 Sites Drive Name and \$20.00 fee to: Boise, ID 83705 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY is (if other than # 4 above): Boise ID 83720-0080 Idaho Banking Company 208 334-2301 6010 Fairivew Avenue Secretary of State use only Boise, ID 83704 IDAHO SECRETARY OF STATE 05/08/1998 09:00 CK: 817 CT: 89878 BH: 188888 Signature: 1 0 20.00 = 20.00 ASSUR NAME David L. Guzzetti Printed Name: #1138 Proprietor Capacity:

(see instruction # 8 on back of form)