



# 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.

07 OCT 15 PM 12:03

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

FOUR GARDENS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>GATEWAY LANDSCAPE SERVICES</u> <u>(W49222) LLC.</u>	<u>4302 W DANSON DR</u> <u>MARLBOROUGH ID 83640</u>

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input checked="" type="checkbox"/> Construction             |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

4. The name and address to which future correspondence should be addressed:

Phil Sunkals  
4302 W DANSON DR  
MARLBOROUGH ID 83640

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature:

Phillip Sunkals

Printed Name:

Phillip Sunkals

Capacity/Title:

MEMBER PARTNER PMS

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE  
10/15/2007 05:00  
CK: 1068 CT: 158810 BH: 1088644  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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