## FILED EFFECTIVE

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

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

2007 APR 30 AM 10: 04

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigned use(s) in the transaction of business is:  Mow Pride Lawn Care	
The true name(s) and business address(es) of the business under the assumed business name:	entity or individual(s) doing
Name	Complete Address
Fred Brooker	61 N Borah St.
	Nampa, ID 83651
The general type of business transacted under the	
☐ Retail Trade ☐ Transportation and P	ublic Utilities
☐ Wholesale Trade ☐ Construction	
✓ Services	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:  Fred Brooker	Secretary of State 700 West Jefferson Basement West PO Box 83720
61 N Borah St.	Boise ID 83720-0080 208 334-2301
Nampa, ID 83651	200 004 2001
5. Name and address for this acknowledgment	Phone number (optional):
CODY IS (if other than # 4 above).	208-880-8231
	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE 84/30/2007 05±00 CK: 2101 CT: 158010 BH: 1858361 1 \$ 25.66 = 25.60 ASSUM NAME
oacity/Title: Owner (see instruction # 8 on back of form)	0 111006
/and instruction # 0 on book of form)	