CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned EP -8 AM 11: 3 gives notice of adoption of an Assumed Business NameRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the Urat Saction of business is: HRTISTIC LANDSCHOLUS 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 DARREN VICKERS 1821 ROSEVELT ST. 3. The general type of business transacted under the assumed business names (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities, Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Mining Construction 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: 1821 ROSEVELT ST. Submit Certificate of Assumed Business 83605 Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 **09/28/1998 0**9:**0**0 CK: 1199 CT: 97224 MH: 148711

Signature:

Printed Name: ____

Capacity: ______

(see instruction # 8 on back of form)

1 8 28.00 = 28.00 ASSIN NOVE 0 2

D18568