



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.

FILED EFFECTIVE
2004 APR -9 AM 8:49
STATE OF IDAHO
SECRETARY OF STATE

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

Green Works Nursery : Country Store

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>Loni Lish</u>	<u>1896 Phoenix Dr. POC. Id 83302</u>
<u>Shane Kammiller</u>	<u>1856 Truckeeville, POC Id 83304</u>

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input 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 \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Green Works Nursery Country Store
1896 Phoenix
POC Id 83302 83302

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

Phone number (optional):

208-237-9125

Secretary of State use only

095165

Signature: Loni Lish

Printed Name: Loni Lish

Capacity: Owner

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE
04/09/2004 05:00
CK: 2557 CT: 158010 BH: 738345
1 @ 25.00 = 25.00 ASSUM NAME # 2