

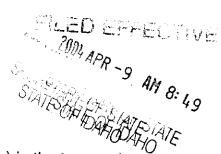
CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction # 8 on back of form)



	DARANEIATA
The assumed business name which the und business is: The assumed business name which the und	dersigned use(s) in the transaction of
Treen Works Nussery	· (oun lry) lose
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Name Anne Mane Mane Mane Mane Manuelles	of the entity or individual(s) doing: Complete Address 196 Thoenights for the 83300 1856 Thuckeswelle, Ric Id 83304
Wholesale Trade Construction Services Agriculture Manufacturing Mining	and Public Utilities Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Seculosly Vursey (suntry) 1819 Thoesey 1829 83303	Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
Signature: Juni Sish	IDAHO SECRETARY OF STATE 94/09/2004 05:00 CK: 2557 CT: 158010 BH: 738345 1 @ 25.00 = 25.00 ASSUM NAME # 2
Printed Name: Landi Lis/1	IDAHO SECRETARY OF STATE 94/09/2004 05:00 CK: 2557 CT: 158010 RH: 738345
Capacity:	CK: 2557 CT: 158010 BH: 738345