

Capacity/Title: owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2605.00019 400000

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.

COMPLETE	LAWN CARE	
The true name(s) and business address(es) business under the assumed business nam		
Name	Complete Address	
JOSH THOMAS	902 CHESTNUT ST.	
	SANDPOINT, ID 83864	,
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West	
JOSH THOMAS	PO Box 83720	
902 CHESTNUT ST.	Boise ID 83720-0080 208 334-2301	
SANDPOINT, ID 83864	200 334-2301	
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional): 208-263-4553	
	Secretary of State use only	
ature: June (signature required)	Sod rotes of control of the control	f s <u>t</u> at

IDAHO SECRETARY OF STATE

06/13/2005 05:00

CK: 1283 CT: 158810 BH: 815742

1 9 25.00 = 25.00 ASSUM NAME # 2

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