

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2009 APR -8 AM 9: 29
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Domingu	lez Lewn Care
The true name(s) and business address(e business under the assumed business name     Name     Hector Dominguez	
3. The general type of business transacted use Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:  Hector Dominguez  3011 Queen Anne Dr  Emmett Idaho 83617	Submit Certificate of Assumed Business
5. Name and address for this acknowledgm copy is (if other than #4 above):	
gnature: Hada Dening varied  inted Name: Hector Dominguez  apacity/Title: Owner	IDAHO SECRETARY OF STATE  94/98/2009 05 # 26  CX: 222530 CT: 158819 BH: 11645

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