

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

SECHE RY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

	Kelley Landscaping & Spraying			
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name Kelley Garden Center, Inc. (CG8456)	ne: 2223 Add	ntity or individual(s) doing <u>Complete Address</u> on Ave. East Idaho 83301	
3.	The general type of business transacted u Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	n and Pul		
4.	The name and address to which future correspondence should be addressed: Kelley Landscaping & Spraying 2287 Addison Ave. East Twin Falls, Idaho 83301		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgme copy is (if other than # 4 above): Same as #2	and address for this acknowledgment (if other than # 4 above):		
Printe	ture: Richard Kelley city/Title: Owner/President		Secretary of State use only	
	ture:		IDAHO SECRETARY OF STATE	
²rinte	rinted Name:		06/15/2012 05:00 CK: 5897 CT: 47868 3H: 1326539 1 0 25:00 = 25:00 ASSUM HANE #	

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