

## CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 11 JM 22 AM 9: 18

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

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigne business is:  Scotty's Tree And	d use(s) in the transaction of  Land scape Service
2.	The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name:  Name  Michael H. Scott 921 E	entity or individual(s) doing  Complete Address 838/5  Gulbert Ave, CDA FD
3.	The general type of business transacted under the a  Retail Trade Transportation and Put  Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4.	The name and address to which future correspondence should be addressed:  Michael Scott  921 F. Gulbert Ave  COA TO 83815	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	
		Secretary of State use only
Signa	ture: Michael H. Scott	
_	d Name: Michael H. Scott	
Capa	city/Title: Sole Proprietoeship/owner	
Signature:		IDAHO SECRETARY OF STATE 07/22/2011 05:00
Printed Name: 1 @ 25.08 = 25.08 ASSUM WANTE N		CK: 1316 CT: 158010 BH: 1283531 1 0 25.00 = 25.00 ASSUM WAME N 2
Capa	city/Title:	7 1110 50:
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