

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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| CERTIFICATE OF ASSUMED BUSINES Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed | S NAME the undersigned |
| Please type or print legibly. Instructions are included on back of ap | plication. |
| The assumed business name which the up business is: | nacroighted doc(s) in the transdettern of |
| THE LAWN PLAN | 10ERS |
| The true name(s) and <u>business</u> address(e business under the assumed business na | me: |
| Name Marathan S Negrete | Complete Address |
| MANGENE S NEGRETE | |
| | Boise 4d, 83704 |
| 3. The general type of business transacted of Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business |
| 4. The name and address to which future correspondence should be addressed: Martha 5 Verefe 7701 VS+ICK Rd HS Boise 3d 83704. 5. Name and address for this acknowledgme copy is (if other than #4 above): | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| | |
| Signature: Marth & Maret. | Secretary of State use only |
| Printed Name: Marthu 5 Negrete Capacity/Title: Gwner Signature: Printed Name: Capacity/Title: | IDAHO SECRETARY OF STATE 97/30/2012 05:00 CK: 1078219 CT: 172099 BH: 1333797 1 0 25.00 = 25.00 ASSUM NAME # 2 |
| abn.omd Rev.0 | D157149 |