

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on other page)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

FILED

1999 FEB 19 A 9:23

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned uses in the transaction of business is:

Kimberly Nursery Solid Scapes, A Partnership

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Wesley Vance

Floyd Vance

Complete Address

P.O. Box 23, Jerome, Idaho 83338

P.O. Box 1811, Twin Falls, Idaho 83301

99 MAR -2 PM 2:00
SECRETARY OF STATE
STATE OF IDAHO

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

Retail Trade

Wholesale Trade

Services

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Manufacturing

Agriculture

Construction

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Transportation and Public Utilities

Finance, Insurance and Real Estate

Mining

4. The name and address to which future Correspondence should be addressed:

Kimberly Nursery Solid Scapes, A Partnership

2862 Addison Ave. East

Twin Falls, Idaho 83301

Phone number (optional): _____

**Submit Certificate of
Assumed Business**

Name and \$20.00 fee to:

**Secretary of State
700 West Jefferson**

**Basement West
PO Box 83720
Boise ID, 83720-0080
(208) 334-2301**

5. Name and address for this acknowledgement copy is (if other than #4 above):

FIRST SECURITY BANK N.A.

COMMERCIAL LOAN DOCUMENTATION CENTER

P.O. BOX 8203

BOISE, IDAHO 83707

Signature: Wesley Vance

Printed Name: Wesley Vance

Capacity: General Partner

Signature: Wesley Vance

Printed Name: Floyd Vance

Capacity: General Partner

Secretary of State Use Only

IDAHO SECRETARY OF STATE

03/02/1999 09:00
CX: 1002 CT: 73294 BH: 192063

03/02/1999 09:00
(see instruction #8 on form) CK: 8329 CT: 66269 BH: 192065

1 @ 10.00 = 10.00 ASSUM NAME # 2

1 @ 10.00 = 10.00 ASSUM NAME # 2

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