227 CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Mar 15 11 12 AM 98 To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned SECRETARY CE STA gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of C business is: Pruning and handscape hino The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name DAvid Michael Zerr 8373 Chinden ** 17 Brise ZD. 83714 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Finance, Insurance, and Real Estate Aariculture Services Construction Minina 4. The name and address to which future Phone number (optional): correspondence should be addressed: Chinden # Submit Certificate of Assumed Business Boise ID 83714 Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only **IDANO SECRETIARY OF STATE** 95/15/1998 89:08 CK: CASH CT: 98789 MH: 111018 Signature: 1 0 20.00 = 20.00 ASSUM MONE Printed Name: D15092 Capacity: OWNER ATOR (see instruction # 8 on back of form)