

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.

2012 AUG 24 AM 9: 20

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

Capacity/Title: KN/Ye// SOM Se

SECRETARY OF STATE STATE OF IDAHO

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| | OTATE OF IDATIO |
|---|---|
| The assumed business name which the undersigned business is: | d use(s) in the transaction of |
| The Flower Petalers | |
| The true name(s) and <u>business</u> address(es) of the education business under the assumed business name: | |
| Name Max B. Clements 3265 1 | Complete Address |
| | W. 2000 N. Rexburg, ID 83440 W. 2000 N. Rexburg, ID 83440 |
| The general type of business transacted under the a | assumed business name is: |
| Retail Trade Transportation and Pull Wholesale Trade Construction | olic Utilities |
| ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: MAX Clements/Treehouse Nursery 32155 W. 2000 N. Rexburg. ID 834440 | 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 |
| nature: Max United | |
| nted Name: MAX B. CIPMENTS | en e |
| nature: Melanie B. Clements | IDAHO SECRETARY OF STATE 18 /24 /2012 65:00 CK: 4865 CT: 273594 BH: 1337148 1 8 25.80 = 25.80 QSSIIN NOME II 2 |

abn.pmd Rev. 07/2010