

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.

2016 AUG 12 AM 10: 47 SECRETARY OF STATE STATE OF IDAHO

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

 The assumed business name which the business is: 	e undersigned use(s) in the transaction of
BRILLIANT LANGSCAPE a	IND LAWN LARE
The true name(s) and <u>business</u> address business under the assumed business Name	name:
	Complete Address
MICHAEL RAY SARGENT	13078 5 CHOLLA DR KUNA 10 83634
3. The general type of business transacte	ed under the assumed husiness name is:
	ation and Public Utilities
Wholesale Trade Construc Services Agricultu	
	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
☐ Finance, Insurance, and Real Es	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
MICHAEL RAY SARGENT	PO Box 83720
13078 SCHOLLA DR KUNA 10	Boise ID 83720-0080 208 334-2301
MICHAEL RAY SARGENT 1307B S CHOLLA DR KUNA 10 83634	_ 200 334-2301
5. Name and address for this acknowledge	
COPY is (if other than # 4 above):	,
	
	Secretary of State use only
Signature: Mill Sar aff	
(4	IDAHO SECRETARY OF STATE
Printed Name: MICHAEL SARGENT	08/12/2016 05:00
Capacity/Title: own € R	CK:CASH CT:158010 BH:1541624 10 25.00 = 25.00 ASSUM NAME #2
Signature:	
Printed Name:	
Capacity/Title:	D 186509

abn.pmd Rev. 07/2010