Capacity/Title:



## **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 JUL 22 AM 9: 14

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

SECRETARY OF STATE

	- UNITED INVITED
1. The assumed business name which the undersig	ned use(s) in the transaction of
business is:  Desert Rain lawn Sp	orinkling
<ol> <li>The true name(s) and <u>business</u> address(es) of th business under the assumed business name:</li> </ol>	ne entity or individual(s) doing
Name	Complete Address
J Kabday (203	N Hitman Apt 102 3
	1), be 10
	08 709
3. The general type of business transacted under the	
Retail Trade Transportation and Wholesale Trade Construction	Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  1203 N Hutman Apt 102 B	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):  [20] N Hartman Apt [02] B	
83704	Secretary of State use only
Signature: A Kolum	IDAHO SECRETARY OF STATE
Printed Name: 15 Rabdan	07/22/2016 05:00 CK:4056404 CT:172099 BH:153863
Capacity/Title:	16 25.00 = 25.00 ASSUM NAME #
Signature:	<b>~</b>
Printed Name:	1188002

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