

CERTIFICATE OF

FILED/EFF

ASSUMED BUSINESS NAME 2807 AUG 12 PM 2: 56 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Lone Pine Tree Scruice 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Lone Pine Tree Service 2001. 28038 38WS. Kexlow 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining **Assumed Business** Name and \$20,00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than #4 above). 208 356 6966

Secretary of State use only

Signature:X Printed Name: Jas. Capacity/Title:_U ₽

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 08/13/2002 05:00 CK: 12319 CT: 135263 BH: 482350 1 0 20.00 = 20.00 ASSUM NAME # 2