CERTIFICATE OF ASSUMED BUSINESS NAME
(Please type or print legibly. See instructions on Paragraph 20 AM 9: 06

SECKE LARY DE SE To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Ide	aho Code, the undersighed OF IDAHO Assumed Business Name.
The assumed business name which the ubusiness is:	
Riverside Landscaping ar	nd Garden Center
The true name(s) and business address(e business under the assumed business name     Name	es) of the entity or individual(s) doing ame is/are:  Complete Address
Bryan T. Collins	1546 North 25th West
Dayle Collins	Idaho Falls, ID 83401
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)	
<ul><li>X Retail Trade</li><li>Wholesale Trade</li><li>Agriculture</li><li>Services</li><li>Construction</li></ul>	Finance, Insurance, and Real Estate
The name and address to which future	
	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgn copy is (if other than # 4 above):  Zions First National Bank	PO Box 83720 Boise ID 83720-0080
401 North Capital	208 334-2301
Idaho Falls, ID 83402	Secretary of State use only  IDANO SECRETARY OF STATE  12/20/2001 05:00  CK: NOCHECK CT: 112633 BH: 435664  1 0 20.00 = 20.00 ASSUM NAME 12
rinted Name: Bryan T. Collins	- 1 4 care = care usen ware a 5
Capacity: Owner	msta

(see instruction # 8 on back of form)