

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2017 JUL 24 AM 9:33

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

ALPHA landscape Services

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Bill Manker 507 Wendell St, Twin Falls ID 83301
(Name) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

3. The general type of business transacted under the assumed business name is:

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Bill Manker
(Name)
507 Wendell St.
(Address)
Twin Falls ID 83301
(City) (State) (Zipcode)

5. Name and address for this acknowledgment

COPY IS (if other than #4):

Bill Manker
(Name)
507 Wendell St.
(Address)
Twin Falls ID 83301
(City) (State) (Zipcode)

Printed Name: Bill Manker

Signature: Bill Manker

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/24/2017 05:00

CK:53421 CT:343046 BH:1594842

1@ 25.00 = 25.00 ASSUM NAME #2

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