

CERTIFICATE OF ASSUMED BUSINESS NAME

FI EN EFFECTE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

112 SEP 10 PH 12: 11

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The assumed business name which the under business is:			
Precision Sprinkless & Landscapina			
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
<u>Name</u>		Complete Address	
Adam Rosa 2	2118 W. Roberts Nampa ID 83651		
Dairck Cavinaugh 21	irck Cavinaugh 2118 U. Roberts Nampa ID ESTATI		
3. The general type of business transacted under the assumed business name is:			
 □ Retail Trade □ Wholesale Trade □ Construction 			
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$20.00 fee to:	
4. The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson Basement West	
Adam RosA 2118 W. Roberts, Nampa ID		PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment		Phone number (optional):	
COPY is (if other than # 4 above):		794-3321	
		Secretary of State use only	
	 38		
Signature: Adam Ros A (signature required)	g 'comp' forms labin. p65 Revised 07.2002	Idaho secretary of state	
Printed Name: Adam Rosa	Vormstabn form Revised 07/2002	09/10/2002 05:00 CK: 445 CT: 163397 BH: 487321	
Capacity/Title: One instruction #8 on back of form)	g 'corp'ik R	1 8 28.80 = 28.88 ASSUM NAME # 2	
(see instruction # 8 on back of form)	í	·	

058128