

CERTIFICATE OF ASSUMED BUSINESS NAME

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

OZ APR ZIL AN SERSFE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Printed Name: LISA C Nelson - Steuens

(see instruction # 8 on back of form)

Capacity/Title: OWNER

SECRETARY OF STATE STATE OF IDAHO

Bouldar Creek Nur	sery
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name LISA C. Nelson-Sturns Por Gregory D. Nelson Dor	entity or individual(s) doing Complete Address OXL30, シロ3 ELD LAUE MELLY エロカトロ 83615
The general type of business transacted under the	e assumed business name is:
Hetail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: LIA C. Nelson - Steuciss P.O. Box 1030 Donnelly JDAHO 831615	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
i. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208)325-3131
	Secretary of State use only

IDAHO SECRETARY OF STATE

94/24/2092 95:99

CK: 104 CT: 158610 BH: 461290
1 8 20.00 = 20.00 ASSUM NAME # 2

