

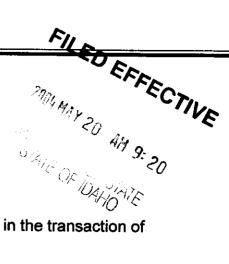
Capacity/Title: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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.



Clean & Green Landscaping		
2. The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u>	s) of the entity or individual(s) doing me: <u>Complete Address</u> <u>\$195.976 Ave #6 Rexburg Fl</u>	78344c
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
David N. Chiddin Sill Survives #6 Repair Land Address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
 Name and address for this acknowledgm copy is (if other than # 4 above). 	Phone number (optional):	
	Secretary of State use on	у
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