## CERTIFICATE OF ASSUMED BUSINESS NAME

2018 SEP 28 AM 10: 22

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

SEURCIARY OF STATE STATE OF IDAHO

Please type or print legibly.
Instructions are included on back of application.

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1. The assumed business name which the undersitudiness is:	gned use(s) in the transaction of two Care and Snow removal
	Complete Address  N. Eth St.
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed:  ARBEE A. Moore  725 N. 8th St.  Coeund Atene, TO 83814	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (If other than # 4 above):	
	Secretary of State use only
Signature: Orlean rum  Printed Name: Arbee A. Moore  Capacity/Title: Owner  Signature:  Printed Name:	IDAHO SECRETARY OF STATE  109/28/2010 05:00  CK: 518856 CT: 172899 BH: 1248771  1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title:	·

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