

CERTIFICATE OF ASSUMED BUSINESS NAME



Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name: 9: 19

Please type or print legibly.

Instructions are included on back of application.

		i protesti sali	
. The assumed business name which	h the undersign	ned use(s) in the transaction of	
business is:			
<u> </u>	iton Gardens and I	Blooms	
. The true name(s) and business ad	dress(es) of the	e entity or individual(s) doing	
business under the assumed busin		in the state of th	
<u>Name</u>		Complete Address	
Carrie S. Trojan	7640 N	7640 N. 15th St.	
After Additions Additions and the Control of the Co	<u>Dalton</u>	Dalton Gardens ID 83815	
with the second			
B. The general type of business trans	sacted under the	e assumed business name is:	
	portation and P		
	struction		
Services Agric	culture		
☐ Manufacturing ☐ Minir	ıg	Submit Certificate of	
Finance, Insurance, and Rea	al Estate	Assumed Business Name and \$25.00 fee to:	
. The name and address to which fu	iture		
correspondence should be address		Secretary of State 450 North 4th Street	
Carrie S. Trojan		PO Box 83720	
7640 N. 15th St.		Boise ID 83720-0080 208 334-2301	
Dalton Gardens ID 83815		200 004 250 1	
. Name and address for this acknow	/ledgment		
COPY IS (if other than # 4 above).			
			
1.00- 10.5		Secretary of State use only	
nature: (arie). Viora-			
ted Name: Carrie S. Trojan			
pacity/Title: Sole Proprietor		IDAHO SECRETARY OF STATE 02/23/2012 05:00	
nature:		CK: 1428 CT: 158010 RH: 1311873 1 0 25.00 = 25.00 ASSUM MANE W	
ted Name:		Lordon Model India &	
pacity/Title:		D153552	
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