

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.

(see instruction # 8 on back of form)

FILED EFFECTIVE

07 APR -2 PM 2:21

SECRETARY OF STATE STATE OF IDAHO

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The assumed business name which the undersigned business is: Silver Edge Lawneare	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Shore Fells Sied Listen Eells Core	Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Put Mholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Share Ecils Colorado Ne	
Caldwell, TO 83605 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-1031-9149 Secretary of State use only
Signature: A Share Life Printed Name: Share Eells Capacity/Title: Curnor (segnature required) Capacity/Title: Curnor	IDAHO SECRETARY OF STATE @4/02/2007 @5 # @ CK: CASH CT: 158818 #H: 1944: 1 8 25.88 = 25.88 ASSUM MANU