Capacity/Title: <u>O いんや</u>イ

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

06 MAR -3 PM 2: 04

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersign business is: Mark Leister's	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Name S13 Haines St Boise ID 83712	he entity or individual(s) doing Complete Address
3. The general type of business transacted under	the assumed business name is:
Retail Trade Wholesale Trade Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Mark E Leister Si3 Haines St Boise ID 33712 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 208-724-7457
	Secretary of State use only
Signature: Mark Leister Capacity/Title: Owner	IDAHO SECRETARY OF STATE 03/03/2006 05:00 CK: 742255 CT: 172099 BH: 941051 1 @ 25.00 = 25.00 ASSUM NAME # ;