

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.

 The assumed business name which the ι business is: 	undersigned use(s) in the transaction of
St. Anthony Boat and Auto Repair	ir
The true name(s) and <u>business</u> address(e business under the assumed business nar	es) of the entity or individual(s) doing
<u>Name</u>	Complete Address
LE ENTERPRISES, L.L.C.	2290 East 600 North, St. Anthony, ID 8344
W 15826	
3. The general type of business transacted t	under the assumed business name is:
	on and Public Utilities
ServicesManufacturingMiningFinance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
Le Enterprises, L.L.C.	Basement West PO Box 83720
2290 East 600 North	Boise ID 83720-0080
Rexburg, ID 83445	208 334-2301
 Name and address for this acknowledgm copy is (if other than # 4 above); 	nent Phone number (optional):
Allied Financial Services	
P.O. Box 674	Secretary of State use only
Rexburg, ID 83440	59
Signature:	IDAHO SECRETARY OF STATE 97/05/2001 09:00 CK: 274 CT: 148451 BH: 486334
Printed Name: Dinh Le	LIDAHO SECRETARY OF STATE
Capacity: Member, Le Enterprises, LLC (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 07/05/2001 09:00 CK: 274 CT: 148451 BH: 406334 1 8 28 69 = 28 69 OSCIM MANC # 2

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