



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.

15 FEB 15 AM 11:06

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

M+L ENTERPRISES

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

MARK A. HALLSTEAD

P.O. BOX 181 MERIDIAN, ID 83642

LETICIA S. HALLSTEAD

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

M+L ENTERPRISES

P.O. BOX 181

MERIDIAN, ID 83642

5. Name and address for this acknowledgment copy is (if other than # 4 above):

SAME

Phone number (optional):

Secretary of State use only

Signature: Mark A. Hallstead
(signature required)

Printed Name: MARK A. HALLSTEAD

Capacity/Title: OWNER

(see instruction # 8 on back of form)