



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.

2006 SEP -8 AM 9:28

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

The Wooden Way

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

Name

Michael Steven Lester

Complete Address

203 Humbird PO Box 543 Kootenai, ID 83840

Kristene Kaye Lester

203 Humbird PO Box 543 Kootenai, ID 83840

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	

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

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

The Wooden Way

PO Box 543

Kootenai, ID 83840

Phone number (optional):

208-263-2160

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

Secretary of State use only

Signature: Kristene K Lester

(Signature required)

Printed Name: Kristene K Lester

Capacity/Title: Owner

(see instruction # 8 on back of form)

Information Form 500
Revised 04/2003

IDAHO SECRETARY OF STATE
09/08/2006 05:00
CK: 6888 CT: 158010 BH: 974070
1 25.00 = 25.00 ASSUM NAME # 2

D103514