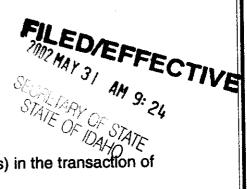


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



1. The assumed business name which the undersigned use(s) in the transaction of business is: Mail Boxes Etc.	
2. The true name(s) and <u>business</u> address(es) of the en business under the assumed business name: Name TRE FNTERPRISES INC. 9323 No. 1402 F.	Complete Address J. GOVERNMENT WAY, HAYDEN IN 83839 SELTICE WAY, FOST FAUS, ID 83857
3. The general type of business transacted under the a Retail Trade	
4. The name and address to which future correspondence should be addressed: TRE FNTERPRISES, INC. DRA MAIL BOXES ETC. 9323 N (-ONERN MENT WAY HAYDEN), IDAHO 83835 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
\$60	Secretary of State use only

Signature:

Printed Name: 1

Robin A

Capacity/Title: SINCOTONY TO

(see instruction # 8 on back of form)

g:\corp\forms\abn.r Revised 01/2001

IDAHO SECRETARY OF STATE

05/31/2002 05:00

CK: 1 CT: 158010 BH: 468926
1 @ 20.00 = 20.00 ASSUM NAME # 2

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