

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.



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

LEISURE TIME CLEANING

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

Name SHELL LEAZER Complete Address 635 Monroe
Twin Falls, Idaho
83301

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

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

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

SAME

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

NA

Signature:

Shelly Leazer

Printed Name:

SHELL LEAZER

Capacity:

Owner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 04/01/1997
0900 78447 2
CK #: 85880294 CUST# 79071
ASSUM NAME 1@ 20.00= 20.00

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