

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2004 SEP 27 PM 2: 44
STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

LEIST 8	ASSOCIATES
2. The true name(s) and business address(abusiness under the assumed business name Name JEFFREY WAYNE LEIST	es) of the entity or individual(s) doing ame: Complete Address 3000 BONNELL ROAD, COEUR D ALENE, ID 83814
	OCCOR D'ALENE, ID 83814
. The general type of business transacted i	under the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: LEIST & ASSOCIATES 3000 BONNELL ROAD, COEUR D ALENE, ID 83814 5. Name and address for this acknowledged copy is (if other than # 4 above):	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
	Secretary of State use only
ted Name: JEFFREY WAYNE LEIST acity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 9/28/2004 05:0 CK: 4267 CT: 158618 BH: 768 1 @ 25.08 = 25.00 ASSUM NAM