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 TARY OF STATE gives notice of adoption of an Assumed Business Name. TATE OF IDAHO	
 The assumed business name which the up business is: Mail Boxes Etc. 	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Walter H. Wilson	Complete Address
Julie A. Wilson	8 21 1 rotter Dr. 1 Wintalls 8330-1879
	11 83301-6811
Rhonda Jensen	"
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade	Transportation and Public UtilitiesFinance, Insurance, and Real EstateMining
The name and address to which future	•
correspondence should be addressed:	Submit Certificate of
Walter H. Wilson	Assumed Business
851 Trotter Drive Twin Falts 10 83301-68	Name and \$20.00 fee to:
Twin Falts, 10 83301-68	Secretary of State
1W14 1415, 11 8 3301-68	700 West Jefferson
5. Name and address for this acknowledgment	· Basement West
COPY IS (if other than # 4 above).	PO Box 83720
	Boise ID 83720-0080 208 334-2301
	Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 06/20/1997
0900 104067 2
CK #: 1002 CUST# 83219
RSSUM NAME 19 20.00= 20.00

#: D5671

Signature: Octor H. Wisson

Printed Name: Walter H. Wisson

Capacity: Partner

(see instruction # 8 on back of form)