



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2006 OCT 10 AM 9:59

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:

Olson Enterprise's

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

Name

Leif Olson

Complete Address

7970 Bottle Bay Rd
Sagle ID 83860

3. The general type of business transacted under the assumed business name is:

Retail Trade Transportation and Public Utilities
 Wholesale Trade Construction
 Services Agriculture
 Manufacturing Mining
 Finance, Insurance, and Real Estate

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

7970 Bottle Bay Rd
Sagle ID 83860

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

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

Phone number (optional):

Signature:

(signature required)

Printed Name:

Leif Olson

Capacity/Title:

Owner

(see instruction # 8 on back of form)

Form 53-504
Rev. 04/2003
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IDAHO SECRETARY OF STATE
10/10/2006 05:00
CK: 2452 CT: 158018 BH: 979214
1 8 25.00 = 25.00 ASSUM NAME # 2

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