## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

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:	
D. L. Enterpri	ses $\frac{5}{2}$
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  Complete Address	
<u>Name</u>	Complete Address ==
Gregory O. Lind	1731 Gielle Ave
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade	
4. The name and address to which future Phone number (optional): <u>j-209-746-002</u> 9 correspondence should be addressed:	
D. L. Enterprises Po Box 577	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Lewiston, Idaho 833	Secretary of State
5. Name and address for this acknowledgmer	700 West Jefferson  Basement West
COPY is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080
1731 Grelle Ave.	208 334-2301
Lewiston, Idaho 83501	Secretary of State use only 3 IDAHO SECRETARY OF STATE
M A SI	11/08/1999 09:00 CK: 11457 CT: 122741 BH: 264541
Signature:	1 @ 28.88 = 28.88 ASSUM MAME # 2
Printed Name: Gregory O: Lind	1 3 2 N 1 1 C
Capacity: Owner (see instruction # 8 on back of form)	D30668