



CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

FILED EFFECTIVE

2005 APR 15 4:11 9:32
STATE OF IDAHO

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

Nationwide Insurance Group

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

Name

Gerald Thompson

Complete Address

8940 Duncan Lane, Boise, ID 83714

Maria Thompson

8940 Duncan Lane, Boise, ID 83714

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

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

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

Maria Thompson

8940 Duncan Lane, Boise, ID 83714

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):

208.853.7391

Signature: Maria Thompson

(signature required)

Printed Name: Maria Thompson

Capacity/Title: Owner, Licensed Insurance Broker

(see instruction # 8 on back of form)

9 Corporation Form 501-065
Revised 04/2003

IDaho SECRETARY OF STATE
04/15/2005 05:00
CK: 1245 CT: 150016 BH: 084870
1 @ 25.00 = 25.00 ASSUM NAME # 2

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