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.

Morgan Networks	
The true name(s) and business address(es) of business under the assumed business name:	
Name	Complete Address
Justin Brumm Morgan	P.O. Box 50738 Idaho Falls, Id. 83405
	267 S Ridge Avenue Idaho Falls, Id. 83402
The general type of business transacted under	er the assumed business name is:
Retail Trade Transportation a	and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
	0
The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
Justin B. Morgan	PO Box 83720
P.O. Box 50738	Boise ID 83720-0080
Idaho Falls, Id. 83405	208 334-2301
Idatio Pails, Id. 05405	
Name and address for this acknowledgmen	t Phone number (optional):
COPY is (if other than # 4 above).	(208) 589-6785
	Secretary of State use only
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(signature required)	Revised Ou/2003
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acity/Title:Owner	IDAHO SECRETARY OF
(see instruction # 8 on back of form)	10/12/2006 CK: 605 CT: 156010 B

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