

## 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.

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SECRETARY OF STATE STATE OF IDAHO

True North Academy	
The true name(s) and business address(es) business under the assumed business name Name  Center Connected, Inc.	of the entity or individual(s) doing e: Complete Address 3736 Ellendale Circle, Idaho Falls, ID 83406
<ul> <li>Wholesale Trade</li></ul>	ler the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:  Stacey Christensen  3736 Ellendale Circle Idaho Falls, ID 83406	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	
Name: Stacey Christensen  ty/Title: President  (see instruction # 8 on book of 6	Secretary of State use only  IDAHO SECRETARY OF STAT  11/20/2008 05: CK: 2153 CT: 179536 BH: 11- 1