	÷ 1	
	÷ 1	
	<u> </u>	
PAGE	02	
	u 2	

CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B Please type or print legibly. NOTE: See instructions on reverse befor	NAME ne undersigned usiness Name. SELRETARY OF STATE STATE OF IDAHD
1. The assumed business name which the und business is: Nelson Data	dersigned use(s) in the transaction of a Acquisition
2. The true name(s) and business address(es) business under the assumed business nam Name Craig Nelson	
 3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Craig Nelson 1303 Indiana Avenue 	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 63720 Boise ID 83720-0080 (208) 334-2301
Coeur d Alene, ID 83814 5. Name and address for this acknowledgme COPY is (If other than #4 above):	nt
Signature: <u>Craig</u> <u>Allom</u> (signature : <u>(signature required)</u> Craig Nelson Capacity/Title: <u>owner</u> (see instruction # 8 on back of form)	Bocretary of State use only IDAHO SECRETARY OF STATE 05/14/2008 05 = 00 CK: 111726 CT: 172899 BH: 11151 1 0 25.00 = 25.00 ASSUM MANE
	D121822