

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2006 JAN 10 PM 3: 25

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

SEUNE IALL HILL

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
Digital Connection	s idano
The true name(s) and business address(es) of the business under the assumed business name: Name: Nathan McLean	ne entity or individual(s) doing Complete Address 1165 E. Wright St. Bolse, ID 83706
3. The general type of business transacted under t	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Nathan McLean 1165 E. Wright St. Boise, ID 83706 5. Name and address for this acknowledgment copy is (if other than # 4 above):	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 Phone number (optional): 208-850-4932
	Secretary of State use only
Signature: (signature required) Printed Name: Nathan McLean Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 91/19/2006 05:06 CK: 699215 CT: 172800 304, 2313

1 8 25.80 = 25.00 ASSUM NAME # 2