



# 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**

2014 MAY 19 PM 1:35

Please type or print legibly.  
Instructions are included on back of application.

SECRETARY OF STATE  
STATE OF IDAHO

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

Legacy Inmate Communications

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

Name

Complete Address

Legacy Long Distance International, Inc.

10833 Valley View St. Ste 150, Cypress, CA 90630

(C 130316)

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

- |                                                              |                                                                         |
|--------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade                        | <input checked="" 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 type="checkbox"/> Finance, Insurance, and Real Estate |                                                                         |

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Legacy Long Distance International, Inc.

10833 Valley View Street, Suite 150

Cypress, CA 90630

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: George Hansell II

Printed Name: George Hansell II

Capacity/Title: Executive Vice President

Signature: Frank Flores

Printed Name: Frank Flores

Capacity/Title: Vice President of Networking

Secretary of State use only

IDAHO SECRETARY OF STATE

05/19/2014 05:00

CK:33950 CT:297032 BH:1425397

1@ 25.00 = 25.00 ASSUM NAME #2

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