

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO
 Pursuant to Section 53-504, Idaho Code, the undersigned
 gives notice of adoption of an Assumed Business Name.

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

PCKeys Training & Consulting

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

<u>Name</u>	<u>Complete Address</u>
Erin A. Olsen	5495 S. Fuchsia Pl. Boise, Idaho 83716-6829
Eric L. Olsen	5495 S. Fuchsia Pl. Boise, Idaho 83716-6829

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Erin A. Olsen
PCKeys Training & Consulting
5495 S. Fuchsia Pl. Ste. 300

Boise ID 83716-6829

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

Signature: Erin A. Olsen

Printed Name: Erin A. Olsen

Capacity: Owner

(see instruction # 8 on back of form)

Submit Certificate of
 Assumed Business
 Name and \$20.00 fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

Secretary of State use only
 IDAHO SECRETARY OF STATE

08/05/1998 09:00
 CK: 561 CT: 102360 BH: 134215

1 @ 20.00 = 20.00 ASSUM NAME

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