

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



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:

COMPUTER DOC

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

Name

Complete Address

DONALD E. PADEN

P.O. BOX 383 KAMIAH, ID 83536

602 MAPLE KAMIAH

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:

Phone number (optional): 1-888-935-1544

DONALD E. PADEN

PO BOX 383

KAMIAH, ID 83536

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

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
IDAND SECRETARY OF STATE

09/03/1997 09:00
CX: 835360 CT: 86606 BH: 35045

1 @ 20.00 = 20.00 ASSUM NAME

D7710

Signature: Donald E. Paden

Printed Name: DONALD E. PADEN

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 2/87

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