

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.

SECRETARY OF STATE
STATE OF IDAHO
JUN -4 AM 9:08

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

Computer Skills Institute

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

Douglas T. Ricks 140 S. 3rd E. Rexburg ID
83440

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

<input checked="" 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 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): _____

Computer Skills Institute
1230 N. Skyline Drive, Suite A
Idaho Falls, ID 83402

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

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

Doug Ricks
140 S. 3rd E.
Rexburg ID 83440

Signature: Douglas T. Ricks

Printed Name: Douglas T. Ricks

Capacity: owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 06/04/1997
0900 98648 2
CK #: 30541 CUST#: 25354
ASSUM NAME 1@ 20.00= 20.00

#: D 5140

Revision 2/97

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