

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

08 JAN 11 AM 10: 43
SECRETARY OF STATE
STATE OF IDAHO

	Cox Business
The true name(s) and business addre business under the assumed business Name	
CoxCom, Inc. (C150693)	1400 Lake Hearn Drive
	Atlanta, GA 30319
3. The general type of business transact	ted under the assumed business name is:
	rtation and Public Utilities
 Wholesale Trade	Submit Certificate of Assumed Business
 The name and address to which future correspondence should be addressed 	700 West Jefferson Basement West
CoxCom, Inc.	PO Box 83720 Boise ID 83720-0080
1400 Lake Hearn Drive	208 334-2301
5. Name and address for this acknowle copy is (if other than # 4 above).	edgment Phone number (optional):
	Secretary of State use only
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gnature: //////	IDAHO SECRETARY OF STATE 91/11/2008 95:206 CK: 588548888 CT: 6674 BH: 1894
(signature required)	1.5 8

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