



CERTIFICATE OF ASSUMED BUSINESS NAME

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

05 OCT -5 PM 4: 57

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Nelson Consulting Group

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

Name

Carl O. Nelson

Complete Address

544 Hearthstone Drive, Boise, Idaho 83702

NCG, Inc.

544 Hearthstone Drive, Boise, Idaho 83702

C162834

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

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

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

NCG, Inc. c/o Jeffrey M. Wislon

Post Office Box 1544

Boise, Idaho 83701

Submit Certificate of
Assumed Business
Name and \$25.00 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):

Phone number (optional):

208-345-9100

Secretary of State use only

Signature: _____

(signature required)

Printed Name: Carl O. Nelson

Capacity/Title: President

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
10/06/2005 05:00
CK: 37080 CT: 50298 BH: 915450
1 @ 25.00 = 25.00 ASSUM NAME # 5

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