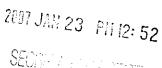


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



SECRETALI OF STATE STATE OF DAHO

business is: Newton and Associates	
2. The true name(s) and business address(business under the assumed business name Name Coface Collections North America, Inc. (Complete Address
3. The general type of business transacted Retail Trade Transportat	d under the assumed business name is:
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Esta 	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Coface Collections North America, Inc. 50 Millstone Road, Bldg, 100, Suite 360 East Windsor NJ 08520	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above): Cornerstone Support, Inc. Attn: Janet Teague	Phone number (optional): 770-587-4595
11111 Houze Rd., Suite 200	Secretary of State use only
Roswell, GA. 30076 Signature: (signature required) Printed Name: MICHAEL J. FERRANTE	
Capacity/Title: CHIEF EXECUTIVE OFFIC (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 3 6 01/23/2007 05:00 CK: 1945 CT: 198621 BH: 18288