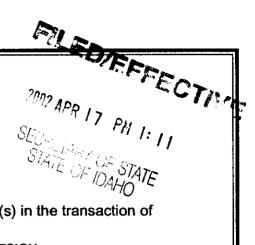


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



| DATABASE PROGRAMMING AND DESIGN | |
|--|--|
| . The true name(s) and <u>business</u> address(es) business under the assumed business name Name KIMBERLY TRENT | |
| The general type of business transacted un | der the assumed business name is: |
| Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: KIMBERLY TRENT 10400 OVERLAND, PMB 165 BOISE, ID 83709 5. Name and address for this acknowledgme 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 Phone number (optional): |
| nature: <u>Kimberly Trent</u> | Secretary of State use only Secretary of State use only Revised 01/2001 Bevised 01/2001 IDAHO SECRETARY OF 6 |
| pacity/Title: OWNER/PRESIDENT (see instruction # 8 on back of form) | IDAHO SECRETARY OF S ### A 1 8 20.00 = 20.00 ASSUM |

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