CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO FILED



| 1. | Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 11 AH '98 1. The assumed business name which the undersigned use(s) in the transaction of business is: dex Business Systems | | | |
|----|---|---|--|--|
| 2. | Danka Office Imaging Company | of the entity or individual(s) doing is/are: Complete Address 1201 Danka Gircle North E. Petersburg, Florida 33716 | | |
| | The general type of business transacted und (mark only those that apply) Retail Trade | ☐ Trai | nsportation and Public Utilities ance, Insurance, and Real Estate | |
| | Danka Office Imaging Company 11201 Danka Circle North St. Petersburg, Florida 33716 Name and address for this acknowledgment copy is (# 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 Bolse ID 63720-0080 208 334-2301 | |
| | 1200 \$. Pine Island Rd. Plantation, Plorida 33324 If 6: Name: David P. Berg ty: Vice President (see instruction #8 on back of form) | gucorpiformisba.pm & Ravisbon 2/37 | Secretary of State use only IDANO SECRETARY OF STATE @9/15/1998 @9:@@ CK: 135817539 CT: 68662 BH: 145338 1 @ 28.88 = 28.88 ASSUM NAME # 2 | |