

Signature:

Printed Name:

Capacity/Title: N

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

08 APR 14 PM 3: 28

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: DocPay.us 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name 2710 Sunrise Rim Rd, #200, Boise, ID 83705 CatRisk.us, LLC 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Assumed Business Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 CatRisk.us, LLC (208) 334-2301 2710 Sunrise Rim Rd. Suite 200 Boise, ID 83705 5. Name and address for this acknowledgment CODY is (if other than # 4 above): Secretary of State use only

IDAHO SECRETARY OF STATE

24/14/2008 05:00

CK: 103 CT: 224930 BH: 1118053

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