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## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO



Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.			
1.	. The assumed business name which the undersigned use(s) in the transaction of business is:		
	American Consumer Network		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
		mplete Address	
	Insurance Network America. Inc. PO Box 5	716, Boise, ID 83705	
3.	The general type of business transacted under the assumer (mark only those that apply)	ımed business name is:	
	Wholesale Trade Agriculture X Fir	ansportation and Public Utilities nance, Insurance, and Real Estate ning	
4.	The name and address to which future correspondence should be addressed:	Culturality Conditionals of	
	American Consumer Network	Submit Certificate of Assumed Business	
	PO Box 5716	Name and \$20.00 fee to:	
	Boise, ID 83705	Secretary of State 700 West Jefferson	
E	Name and address for this saknowledgment	Basement West	
Э.	Name and address for this acknowledgment copy is (if other than # 4 above):	PO Box 83720	
		Boise ID 83720-0080 208 334-2301	
		233 00 : 200 :	
		Secretary of State use only	
	7872	TRAID CEPOETRON AS STATE	

Signature:

Printed Name: Gerald G. Hartman

Capacity: <u>President</u>

(seé instruction # 8 on back of form)

DATE 03/31/1997 0900 78189 CX #: 5845 CUST# 79051 ASSLM NAME 10 20.00= 20.00

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