CERTIFICATE OF ASSUMED BUSINESS (ME (Please type or print legibly. See instructions on provided)					
		the SECRETARY OF STATE, STATE OF I Pursuant to Section 53-504, Idaho Cod gives notice of adoption of an Assurant	Z	e unders	gned
1	١.	The assumed business name with the unbusiness is: The Cable Differnati	ders	igned us	ODAHO LOAHA
					<u> </u>
2	2.	The true name(s) and business address(es) or the composition of individual(s) doing business under the assumed business name is/are:			
		John ColwEll	N,	<u>Сог</u> 3257	nplete Address CREENFERHV
		COMINIE COLWELL 1	Po	STF	4.115, ID 8385-4
cc_		Colwell Communications C	<u>o.</u>		,
3	3.	The general type of business transacted under the assumed business name is: (mark only those that apply)			
		Retail Trade) (nsportation and Public Utilities ance, Insurance, and Real Estate ing
4	The name and address to which future Phone number (optional): correspondence should be addressed:				
		John OR Connie ColwEll			Submit Certificate of
		N.3251 GreenFERRY RO			Assumed Business Name and \$20.00 fee to:
		POSTFALLS, ID 83854			Secretary of State
5),	Name and address for this acknowledgmen copy is (If other than # 4 above):	t		700 West Jefferson Basement West PO Box 83720
		COPY 13 (II other than # 4 above).			Boise ID 83720-0080 208 334-2301
					Secretary of State use only
		0	Raviaton 2/87		
Signature: White College					IDAHO SECRETARY OF STATE
Printed Name: Conne Columbia (Secondary: Secondary: Sec					08/03/2000 09:00 CK: 19204 CT: 134303 BH: 338450
Capacity: Sed Treasurer (see instruction # 8 on back of form)					1 @ 20.00 = 20.00 ASSUM NAME # 2
					D37897