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.

FILED EFFECTIVE

03 MAY 16 PM 2:41

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:
   Melody's Transmission Service

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
Ronald Lee Hicks jr	P.O. Box 1204
	Mtn. Home ID
	83647

3. The general type of business transacted under the assumed business name is:

- [ ] Retail Trade
- [ ] Wholesale Trade
- [x] Services
- [ ] Manufacturing
- [ ] Finance, Insurance, and Real Estate
- [ ] Transportation and Public Utilities
- [ ] Construction
- [ ] Agriculture
- [ ] Mining

4. The name and address to which future correspondence should be addressed:
   Melody's Transmission Service
   P.O. Box 1204
   Mtn. Home ID 83647

Submit Certificate of Assumed Business Name and **$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional): (208) 580-2065

Signature: [signature] (signature required)

Printed Name: Ronald Lee Hicks jr

Capacity/Title: Owner.

(see instruction # 8 on back of form)

Secretary of State use only

gr:\corp\forms\abn forms\abn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
05/16/2003 05:00
CK: CASH CT: 158010 BH: 681130
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 65492