



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

2002 JUN -5 AM 8:44

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:

WIRELESS SOLUTIONS

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

<u>Name</u>	<u>Complete Address</u>
<u>Ralph Jodine Breeding</u>	<u>2697 Breeding Rd. American Falls, ID 83211</u>
_____	_____
_____	_____

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Ralph Jodine Breeding
2697 Breeding Rd.
American Falls, ID 83211

Submit Certificate of
Assumed Business
Name and \$20.00 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):

Washington Mutual Bank
1110 Call Creek Dr. Suite 7
Pocatello, ID 83201

Phone number (optional): _____

Signature: Ralph Breeding

Printed Name: Ralph Breeding

Capacity/Title: _____

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\abn form\slabn.p65
Revised 01/2001

IDHO SECRETARY OF STATE
06/05/2002 05:00
CK: 881413516 CT: 97112 BH: 469754
1 @ 20.00 = 20.00 ASSUM NAME # 2

D55515