

State of Idaho

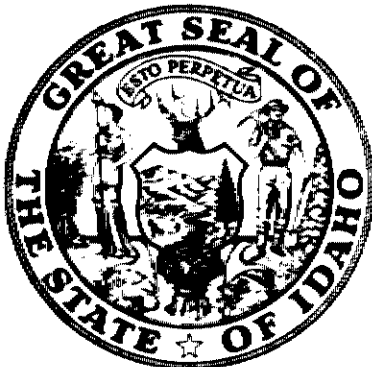
Department of State.

CERTIFICATE OF AUTHORITY OF KSRV, INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of KSRV, INC.
_____ for a Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to KSRV, INC.
_____ to transact business in this State under the name KSRV, INC.
_____ and attach hereto a duplicate original of the Application for such Certificate.

Dated November 17, 1987




SECRETARY OF STATE


Corporation Clerk

APPLICATION FOR CERTIFICATE OF AUTHORITY

(Profit Corporation)

To the Secretary of State of Idaho

Pursuant to Section 20-1-10, Idaho Code, the undersigned Corporation hereby applies for a Certificate of Authority to transact business in your State, and for that purpose submits the following statement:

1. The name of the corporation is 87 NOV 17 AM 9 01 KSRV, INC.

2. The name which it shall use in Idaho is KSRV, INC.

(To be used only when required to avoid a conflict with a name already on file. Must be accompanied by a Board of Directors resolution adopting assumed name in Idaho.)

3. It is incorporated under the laws of OREGON

4. The date of its incorporation is March 20, 1984 and the period of its duration is PERPETUAL

5. The address of its principal office in the state or country under the laws of which it is incorporated is P.O. BOX 129, Ontario, Oregon 97914

6. The address to which correspondence should be addressed, if different from that in item 5.

7. The street address of its proposed registered office in Idaho is 415 PARK AVENUE
TWIN FALLS, IDAHO 83303, and the name of its proposed

registered agent in Idaho at that address is DAVID N. CAPPS

8. The purpose or purposes which it proposes to pursue in the transaction of business in Idaho are:
RADIO BROADCASTING

9. The names and respective addresses of its directors and officers are:

| Name | Office | Address |
|------------------------|------------------|--|
| <u>DAVID N. CAPPS</u> | <u>PRESIDENT</u> | <u>168 PIERCE STREET, TWIN FALLS, ID.</u> |
| <u>GORDON L. CAPPS</u> | <u>SECRETARY</u> | <u>P.O. BOX 129, ONTARIO, OREGON 97914</u> |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

(continued on reverse)

Name

Office

Address

- 10. The corporation accepts and shall comply with the provisions of the Constitution and the laws of the State of Idaho.
- 11. This Application is accompanied by a certificate of Corporate Status or Existence, duly authenticated by the proper officer of the state or country under the laws of which it is incorporated.

Dated: 11/1/87

KSRV, INC.

(Corporation Name)

By X David N. Capps
Its President / Vice President (please specify)

and X Gordon L. Capps
Its Secretary / Assistant Secretary (please specify)

STATE OF OREGON)
COUNTY OF Malheur) ss:

I, Tamaral. Fulwyler, a notary public, do hereby certify that on this first day of November, 19 87, personally appeared before me David N. Capps & Gordon L. Capps, who being by me first duly sworn, declared that ~~that~~ they are ~~the~~ the President & Secretary of KSRV, INC.

that ~~the~~ they signed the foregoing document as officers of the corporation and that the statements therein contained are true.

Tamaral A. Fulwyler
Notary Public
my commision expires 1/9/91



Office of the Secretary of State Corporation Division

I, **Robert Tintott**, *Director of the Corporation Division*,

DO HEREBY CERTIFY:

KSKV, INC. was incorporated under the Oregon **Business Corporation Act** on **March 20, 1984** and is an existing corporation as of the date of this certificate.

Robert Tintott

Director

By *Mark S. Brady*
Date *October 19, 1987*