

## CERTIFICATE OF DEFFECTIVE ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 17 Please type or print legibly. Please type or print legibly.

Please type or print regions.

NOTE: See instructions on reverse before filing.

SALE OF IDALIO

The assumed business name which the ubusiness is:      High Speed Service of	
2. The true name(s) and business address(e business under the assumed business na Name  Rodney A. Lynd  ———————————————————————————————————	es) of the entity or individual(s) doing ame:  Complete Address  508 W. Jana Ave.  Post Falls, 1D 83854
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Rodney A. Lynd 508 W. 22nd Alc.	on and Public Utilities  Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720
5. Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State use only
Signature: Rodnaf A. Synd  Printed Name: Rodney A. Lynd  Capacity/Title: OWKK  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  94/17/2003 05:00  CK: 5617 CT: 158018 BH: 675384  1 0 25.00 = 25.00 ASSUM NAMF #