



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

2003 FEB 28 AM 9:04

SECRETARY OF STATE
STATE OF IDAHO

The undersigned elects to be a Limited Liability Partnership, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-1001

1. The name of the limited liability partnership is: AMERICAN WIRELESS, LLP

2. If previously filed a statement of partnership, the name used in that statement is: _____

The date it was filed with the Idaho Secretary of State's Office was: _____

3. The street address of the limited liability partnership's chief executive office is:
9398 W. OVERLAND RD., BOISE, ID 83709

4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: _____

5. The mailing address for future correspondence is: 9398 W. OVERLAND RD., BOISE, ID 83709

6. The above-named partnership elects to be a limited liability partnership.

7. Future effective date (optional): _____

8. Signature of at least 2 partners:

1) *Patrick E. Tilman*

Typed Name PATRICK E. TILMAN

2) *Ralena L. Tilman*

Typed Name RALENA L. TILMAN

3) *Jeffrey R. Tilman*

Typed Name JEFFREY R. TILMAN

01/2001
Revised
05/05
partnership

Secretary of State use only

IDAHO SECRETARY OF STATE
02/28/2003 05:00
CK: 6394 CT: 167833 BH: 665644
1 @ 100.00 = 100.00 QUALIF LLP # 2

J 970