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CERTIFICATE OF ASSUMED BUSINESS NAME

SECRETARY OF STATE
STATE OF IDAHO

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.

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

Graphic Links

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
Melone LLC	1616 Brookfield Court
W67413	Twin Falls, Idaho, 83301

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

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

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Melone LLC
1616 Brookfield Court
Twin Falls, Idaho 83301

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

Signature: Tina Melone
(Signature required)
 Printed Name: Tina Melone
 Capacity/Title: Secretary
(see instruction # 8 on back of form)

Secretary of State use only

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Rev 01/03/03

IDAHO SECRETARY OF STATE
 02/20/2009 05:00
 CK: 1829 CT: 234319 IN: 1157823
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