CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

D8 APR -2 AM 9: 38

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

Highland Transcri	ption Services
2. The true name(s) and business address(es) o business under the assumed business name: Name Pamela J. Hittle	f the entity or individual(s) doing Complete Address 203 Mica Road Naples Id, 83847
3. The general type of business transacted under Retail Trade Transportation an Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Highland Transcription Services /Pamela Hittle 203 Mica Road Naples, Idaho 83847	
5. Name and address for this acknowledgment copy is (if other than #4 above):	
rinted Name: Pamela J. Hittle apacity/Title: Owner (see instruction # 8 on back of fem.)	Secretary of State use only
rinted Name: Pamela J.Hittle	
apacity/Title: Owner	
(see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 94/02/2008 05:00

X: 93462644587 CT: 158818 BH: 1187938 1 8 25.88 = 25.88 ASSUM HAME # 2

