

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2016 JUN -9 PM 2: 32

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under	rsigned use(s) in the transaction of
business is:	
Of Row Estate Gro	
2. The true name(s) and <u>business</u> address(es) o business under the assumed business name: Name Od morkeling Group LIC	Complete Address
3. The general type of business transacted unde Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is: nd Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Or marketive Group LH 3138 Bown way Boire to 83706	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above);	
	Secretary of State use only
Signature: Brant Printed Name: Karni Brant Capacity/Title: Owner	IDAHO SECRETARY OF STATE 06/09/2016 05:00 CK:3932254 CT:172099 BH:153253' 10 25:00 = 25:00 ASSUM NAME #2
Signature:	→
Printed Name: Capacity/Title:	D187144

abri.pmd Rev. 07/2010