

## CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction # 8 on back of form)

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SECRETARY OF STATE STATE CE pouro

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Allied Mortgage Resources	
2. The true name(s) and business address(e business under the assumed business name  Name  Mann Mortgage, LLC  (W31851)	
	on and Public Utilities
<ul> <li>Wholesale Trade ☐ Construction</li> <li>Services ☐ Agriculture</li> <li>Manufacturing ☐ Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  1220B Whitefish Stage Road  Kalispell, MT 59901	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgm copy is (if other than # 4 above):</li> </ol>	eent Phone number (optional):
	Secretary of State use only
gnature:  (signature required)  Thomas J. Greiner  apacity/Title:  Managing Member	IDAHO SECRETARY OF STATE  ### ### ### ### ####################