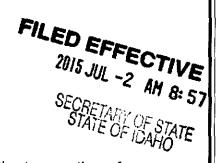


## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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

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



	"L OF IDAHO"
<ol> <li>The assumed business name which the under business is:</li> </ol>	signed use(s) in the transaction of
Metschke Group	
1	
<ol><li>The true name(s) and <u>business</u> address(es) of business under the assumed business name:</li></ol>	r the entity or individual(s) doing
<u>Name</u>	Complete Address
	231 5 Millhollow Rd
	Lexburg, 10 83440
3. The general type of business transacted unde	
Retail Trade Transportation ar Wholesale Trade Construction	id Public Utilities
Services Agriculture	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed: Rebecca Metschke	450 North 4th Street PO Box 83720
RESTURNIESCHIE RESTURNIESCHIE	Boise ID 83720-0080
Rexburg 1D 83440	208 334-2301
5. Name and address for this acknowledgment	
CODY is (if other than # 4 above).	
	Secretary of State use only
Signature: Seberia New Colle	IDAHO SECRETARY OF STATE
Printed Name: Rebecca Metschke	07/02/2015 05:00 CK:4451 CT:158010 BH:1482361
Capacity/Title: Pancipal	1@ 25.00 = 25.00 ASSUM NAME #
Signature:	
Printed Name:	D180097.

abn.pmd Rev. 07/2010

Capacity/Title: