

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.

112 AUG 30 PM 3: 49

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

STATE OF IDAHO

1. The assumed business name which the under business is: Metrapolis	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name: Name Torge Alvarado Pivas	
3. The general type of business transacted under	er the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Torge Alvarado Pivas Boise To Safole 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	Secretary of State use only
Signature:Ove & Alacycoo & Signature required) Printed Name:Capacity/Title:	IDAHO SECRETARY OF STATE OB/30/2002 05 = 06 CX: CASH CT: 158616 BH: 485748 1 0 20.00 = 20.00 ASSUM MANE 1 2
(see instruction # 8 on back of form)	\$ 5785¢