227



CERTIFICATE OF ASSUMED BUSINESS NAME

OFTR 28 PH 12:00

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

SI. LA STATE SILI MHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

	MRS As	sociates
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
	Name	Complete Address
	MRS BPO, L.L.C.	3 Executive Campus, Suite 400
	(W72814)	Cherry Hill, NJ 08002
3.		nder the assumed business name is:
	 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
	1401 Shoreline Drive, Suite 2 Boise, ID 83702	PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt Phone number (optional):
		Secretary of State use only
nte	Name: Jeffrey Freedman city/Title: Manager (see instruction # 8 on back of form)	Sed uses to see the second of secretary of state of second of second of secretary of state of second of se