

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.

SECTION OF STATE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

| MTM Proper | ty Management |
|---|--|
| The true name(s) and business address(es business under the assumed business name | • |
| 3. The general type of business transacted un | |
| Retail Trade | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgme copy is (if other than # 4 above): | Phone number (optional): 208-794-6678 |
| | Secretary of State use only |
| Signature: | IDANO SECRETARY OF STATE 11000 SECRETARY OF |