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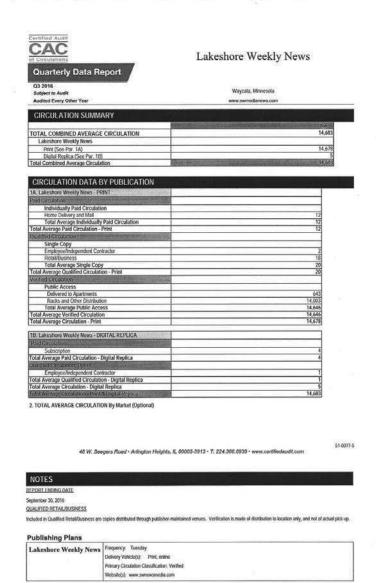
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CNOTIC



Operations Director

Page 2 of 2 • 51-0077-5 Certified Audit of Circulatio (Published in the Lakeshore Weekly News on Tuesday, November 8, 2016;

ASSUMED NAME

OFFICE OF THE MINNESOTA SECRETARY OF STATE CERTIFICATE OF ASSUMED NAME

Minnesota Statutes Chapter 333 The filing of an assumed name does not provide a user with exclusive rights to that name. The filing is required for consumer protection in order to enable customers to be able to identify the true owner of a business

ASSUMED NAME: Referz PRINCIPAL PLACE OF BUSINESS: 5115 Excelsior Blvd. #426, St. Louis Park, MN 55416 USA

NAMEHOLDER(S): Agents Ranking L.L.C., 5115 Excelsior Blvd. #426, St. Louis Park, MN 55416 United States and Charles M. Harris, 5115 Excelsior Blvd. #426, St. Louis Park, MN 55416 USA

you submit an attachment, it will be incorporated into this document. If the attachment conflicts with the information specifically set forth in this document, this document supersedes the data referenced in the attachment.

By typing my name, I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set

forth in Section 609.48 as if I had signed this document under oath. SIGNED BY: CMH MAILING ADDRESS: 5115 Excelsior Blvd. #426, St. Louis

Park, MN 55416 Date Filed: 10/17/2016 (Published in the Lakeshore Weekly News on Tuesday, Weekly News on Tuesday November 1 and 8, 2016; No. 8700) Tuesday,

OFFICE OF THE MINNESOTA SECRETARY OF STATE Assumed Name/Amendment to **Assumed Name Minnesota Statutes Chapter 333**

The filing of an assumed name does not provide a user with exclusive rights to that name. The filing is required for consumer protection in order to enable consumers to be able to identify the true owner of a business.

1. List the exact assumed name under which the business is or will be conducted: Estimate Division Principal Place of Business:

22410 County Road 30, Corcoran, 3. List the name and complete

street address of all persons conducting business under the above Assumed Name, OR if an entity, provide the legal corporate, LLC, or Limited Partnership name and registered office address: Mark Murphy, 22410 County Road 30, Corcoran, MN 55374

This certificate is an amendment of Certificate of Assumed Name File Number 835588600024

Originally filed on 8/05/2015 Under the name:

5. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized

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AUDIT REPORT PERIOD ENDING DATE THE NIELSEN COMPANY (U.S.), INC. ESTIMATES

4. EXPLANATORY - OTHER:

(Published in the Lakeshore Weekly News on Tuesday, November 8, 2016;

me to sign this certificate on his/ her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

Dated: 10/10/16 Mark Murphy-Owner Mark Murphy - Contact Name 763-443-3859

Dated: 10/24/2016

(Published in the Lakeshore Weekly News on Tuesday November 1 and 8, 2016; No. 8702)

Early Deadline Notice for the Lakeshore Weekly News due to upcoming Holiday is NOON Wed., Nov. 16th for the following Tuesday's issue.

Faxes are not accepted.