

**State of Indiana  
Office of the Secretary of State**

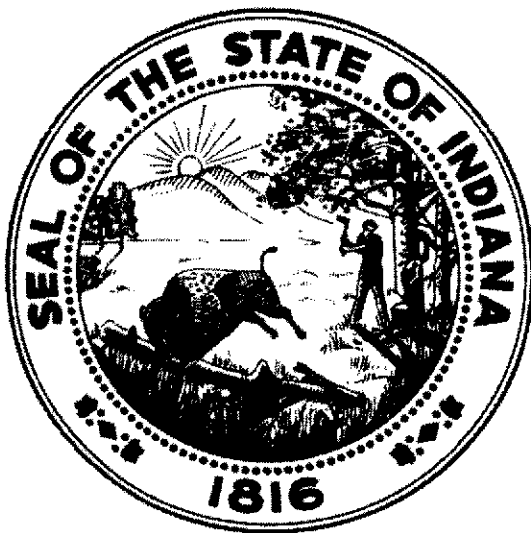
**CERTIFICATE OF INCORPORATION  
of**

**MOTORCYCLE RIDER TRAINING OF FORT WAYNE INC.**

I, TODD ROKITA, Secretary of State of Indiana, hereby certify that Articles of Incorporation of the above For-Profit Domestic Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

NOW, THEREFORE, with this document I certify that said transaction will become effective Monday, December 22, 2008.

In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 22, 2008.



A handwritten signature in black ink, reading "Todd Rokita".

TODD ROKITA,  
SECRETARY OF STATE

**State of Indiana  
Office of the Secretary of State**

**Certificate of Assumed Business Name  
of**

**MOTORCYCLE RIDER TRAINING OF FORT WAYNE INC.**

I, CONNIE LAWSON, Secretary of State, hereby certify that a Certificate of Assumed Business Name of the above Domestic For-Profit Corporation has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

Following said transaction, the above named entity will transact business under the assumed business name(s) of:

**MOTORCYCLE RIDER TRAINING IN INDIANA**

NOW, THEREFORE, with this document I certify that said transaction will become effective **Thursday, July 26, 2018.**



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, **July 26, 2018.**

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

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To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>

**State of Indiana  
Office of the Secretary of State**

**CERTIFICATE OF ASSUMED BUSINESS NAME**

of

**MOTORCYCLE RIDER TRAINING OF FORT WAYNE INC.**

I, Connie Lawson, Secretary of State of Indiana, hereby certify that Certificate of Assumed Business Name of the above For-Profit Domestic Corporation has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

Following said transaction the entity named above will be doing business under the assumed business name(s) of:

**M.R.T.**

NOW, THEREFORE, with this document I certify that said transaction will become effective Monday, January 04, 2016.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, January 04, 2016

*Connie Lawson*

CONNIE LAWSON,  
SECRETARY OF STATE