

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

709H AUG 1 7 PH 12: 49

SECRETARY OF STATE STATE OF 1740

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

Carryonv	iew Dental
The true name(s) and business address(es) business under the assumed business name Name Aries J Ganir, DMD, P.C.	of the entity or individual(s) doing e: Complete Address 9197 Kestrel Ct, Middleton, ID 83644
C156074	
3. The general type of business transacted und	der the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 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
	99 06
nature: (signature required)	IDANO SECRETARY OF STATE
nted Name: Aries J Ganir	formslabin forms
pacity/Title: President	e α

CK: 2001 CT: 181528 BH: 761320 1 0 25.00 = 25.00 ASSUM NAME # 3