## CERTIFICATE OF ASSUMED BUSINESS NAMECTIV

	To the SECRETARY OF STATE, ST Pursuant to Section 53-504, I gives notice of adoption of an	ΓΑΤΕ OF ID daho Code,	AHO , the undersigned 12 619:22 Business Name	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:  Eastgate Pet Clinic			
2.	The true name(s) and business address(es) business under the assumed business name  Name		e is/are: <u>Complete Address</u>	
	Robert J. Gilmore	6260	5. Boise Ave, Boise, I.	
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)			
	☒ Retail Trade ☐ Manufacture   ☐ Wholesale Trade ☐ Agriculture   ☒ Services ☐ Construction		Transportation and Public Utilities Finance, Insurance, and Real Esta Mining	
4.	The name and address to which future correspondence should be addressed:  Or. Robert Gilmore	Phone number (optional): 336-3278  Submit Certificate of		
	626 E. 13015e Ave		Assumed Business Name and \$20.00 fee to:	
	Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301		
		12/99	Secretary of State use only IDAHO SECRETARY OF STATE	
Signatu	ure: Add Olile	Revision 12/99	06/12/2000 09:00 CK: 16452 CT: 132253 BH: 325446 1 8 28.88 = 28.88 ASSUM NAME # 2	
Printed	Name: Robert J. Gilmore	n.p65	aurou , recent resear x L	
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