(OK ins)



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.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: SNAP- Safety Net for AIDS program 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Family Practice Residency of 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Submit Certificate of Services Assumed Business Mining Manufacturing Name and \$25.00 fee to: Finance, insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODV IS (if other than # 4 above): Secretary of State use only

SNAD Mangaer

(see instruction # 8 on back of for b)

Signature:_

Printed Name:

Capacity/Title:

IDAHO SECRETARY OF STATE

04/21/2006 05:00

CK: 77823 CT: 199485 BH: 958682

1 8 25.06 = 25.06 ASSUM NAME # 2

