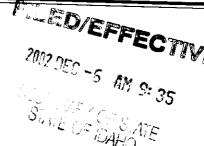


CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

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



| The true name(s) and business address business under the assumed business r | s(es) of the entity or individual(s) doing |
|--|--|
| Name Henry Schein, Inc. | name: Complete Address |
| C143987 | 135 D uryea Road Melville, NY 11747 |
| 3. The general type of business transacted | l under the assumed business name is: |
| Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta The name and address to which future correspondence should be addressed: Michael S. Ettinger, Vice President 135 Duryea Road Melville, NY 11747 | Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgn | ment Phone number (optional): |

IDAHO SECRETARY OF STATE
12/06/2002 05:00

CK: 1846 CT: 78629 BH: 649871
1 0 20.00 = 20.00 ASSUM NAME # 2

D60535

Printed Name: Michael S. Ettinger

(see instruction # 8 on back of form)

Capacity/Title: Vice President