## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO FILED

Pursuant to Section 53-50- gives notice of adoption of	4, Idaho Code ithe undersigned an Assumed Business Name.
	the undersigned use(s) in the transaction of
FRANKLIN CHIROPRACTIC	
The true name(s) and business addre business under the assumed busines	ess(es) of the entity or individual(s) doing es name is/are:
Name SHAWN A. RUDKIN	Complete Address 5615 FRANKLIN ROAD, BOISE ID 83705
The general type of business transact (mark only those that apply)	ted under the assumed business name is:
Retail Trade Manuface Wholesale Trade Agricultu Services Construc	ure Finance, Insurance, and Real Estate
<ol> <li>The name and address to which future correspondence should be addressed</li> <li>5615 FRANKLIN ROAD</li> </ol>	
BOISE, ID 83705	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledge 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
	Secretary of State use only  IDANO SECRETARY OF STATE
ignature: Shewn a. Rudkin	IDANO SECRETARY OF STATE  11/26/1999 89:00  CK: 1816 CT: 123416 BH: 269168
rinted Name: Shawn A. Rudkin	1 8 28.80 = 29.00 ASSUM NAME # 2
apacity: Owner	-   3/07/5
(see instruction # 8 on back of form)	oppose /