	TARY OF STATE,		DAHO	
	t to Section 53-504 lice of adoption of		e, the undersigned Business Name	
			ed use(s) in the transaction of	HO
business is:				
Laton Ch	hiropractic Cer	nter		· · ·
2. The true name(s) ar	nd business addre	ss(es) of the	entity or individual(s) doing	
business under the		• •		
<u>Shawn Alan Ri</u>	ame	271 6	Complete Address Latah Boise, Idaho 83	27/12-
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