

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned hereby certify the adoption of an Assumed Business Name.

**FILED/EFFECTIVE**

001122 27 11 2:44

State of Idaho

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Palouse Surgical Associates

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Address
<u>John P. Lundebj M.D., FACS</u>	<u>619 S. Washington, Suite 101 Moscow, ID 83843</u>
<u>Kevin M. Johnson, M.D.</u>	<u>same</u>

3. The general type of business transacted under the assumed business name is:

9

See categories on the reverse

4. The name and address to which correspondence should be addressed:

John P. Lundebj M.D., FACS  
619 S. Washington, Suite 101 Moscow ID 83843

Signed

John P. Lundebj

By

owner John P. Lundebj, M.D.

Submit Certificate of Assumed  
Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

Revision 10/98  
S:\suptform\assumed\assumed.htm

IDAHO SECRETARY OF STATE

03/21/2000 09:00  
CX: 2602 CT: 120520 DN: 300963

1 @ 20.00 = 20.00 ASSUM NAME # 2

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