CERTIFICATE OF ASSUMED BUSINESS NAME

20	the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cooloption of an Assumed Business Name.	de, the undersigned gives notice of JUN 25 All n: 35
1.	SECRETARY US STATE OF IDA 1. The assumed business name which the undersigned use(s) in the transaction of business is: SECRETARY US STATE OF IDA IDA	
	EVENING Medical Clinic	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
٠	<u>Name</u>	<u>Address</u>
	Michael P. Klett	99 F. 300S. Burley, 71. 83318
3.	The general type of business transacted under the assumed business name is:	
	Providing medical services, to	cutment and diagnosis
4. The name and address to which correspondence should be addressed:		
Signed		
By Michael Y. Klett		
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer #
	Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Secretary of State use only
м		IDANO SECRETARY OF STATE DATE 06/25/1997 0900 105543 2 CK #: 4037 CUST# 83473 ASSUM NAME 18 20,00= 20,00

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