

Sep 21 04 08:42p
09/15/2004 13:28Luann M. Ganz
WITHERSPOON KELLEY → 9P12086672631

208-664-1326

P. 2
NO.485 0002

FILED EFFECTIVE



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.

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

Neurosurgery and Spine Northwest

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

Name

Complete Address

William F Ganz FACS PLLC

850 W. Ironwood Dr.

W16799

Coeur d'Alene, Idaho 83814

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

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

William F. Ganz, MD

1107 Ironwood Drive

Coeur d'Alene, Idaho 83814

Phone number (optional):

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature:

William F. Ganz, MD
(signature required)

Printed Name:

William F. Ganz, MD

Capacity/Title:

Member

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
09/23/2004 05:00
CK: none CT: 24485 BH: 767645
1 @ 25.00 = 25.00 ASSUM NAME # 3

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