## CERTIFICATE OF ASSUMED BUSINESS NAME FILED

To the SECRETARY OF STATE, STATE OF IDAHO 98 JUL 16 AM 9:53
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of

	The state of the s	STATE OF IDAHO
1.	The assumed business name which business is:	h the undersigned use(s) in the transaction of
	MEDICAL RESOURCES	
2.	The true name(s) and business add business under the assumed business	dress(es) of the entity or individual(s) doing ess name is/are:
	<u>Name</u>	Address
	DONALD D WOODS	2307 S ATLANTIC
3. The general type of business transacted under the assumed business nan		noted under the accuracy to
	denoted type of business trainsa	acted under the assumed business name is:
	SERVICE	. <b>'</b>
	See categories on the reverse	
4.	<ol> <li>The name and address to which correspondence should be addressed:</li> </ol>	
	2307 S ATLANTIC	respondence should be addressed.
,	ZJO7 5 ATLANTIC	
	BOISE ID 83705	
	Sign	ned three Aldsols
	Ву	Donald D. Woods
	Cap	pacity Dunev
_		
	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:	Customer #
_		Secretary of State use only
5	Secretary of State	
	700 West Jefferson	IDAHG SECRETARY OF STATE  07/16/1998 09:00  CK: 603148735 CT: 1838 BH: 128450
	<sup>3</sup> O Box 83720 Boise ID 83720 0080	ER: 683148733 CI: 1836 BR: 120456
	N ALBOR TO CO. B. A. A. C. C. A. D. C. M. L. J.	

#D16742