

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO 97 NOV 12 AM 10:37  
Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name

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

TREASURE Valley Veterinary Hospital

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

Complete Address

Richard L Shackelford

211 TRANQUIL Ln

Engle Id 83616

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

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

Phone number (optional): 208-286-7301

Treasure Valley Vet Hosp.

2600 S Meridian Rd

Meridian Id 83683642

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

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

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

Signature:

Richard L Shackelford

Printed Name:

Richard L Shackelford

Capacity:

owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

11/21/1997 09:00  
CK: 389 CT: 90149 BH: 57478

1 @ 20.00 = 20.00 ASSUM NAME

09906

Revision 2/87

g:\corp\form\labn.pds