

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

**FILED EFFECTIVE**

2015 SEP 15 PM 4:11

SECRETARY OF STATE  
STATE OF IDAHO

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

Sun Valley Smile Designs

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

John Calvert120 Second Ave., Suite 202, Ketchum, Idaho 83340

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

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

4. Mailing address for future correspondence:

John Calvert

(Name)

PO Box 419

(Address)

Ketchum

(City)

Idaho

(State)

83340

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: John CalvertSignature: *John Calvert*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Rev. 08/2015

Secretary of State use only

IDAHO SECRETARY OF STATE

09/16/2015 05:00

CK:3209132 CT:172099 BH:1492440

1@ 25.00 = 25.00 ASSUM NAME #2

D181478