

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2015 AUG 25 PM 2: 12

SECRETARY OF STATE  
STATE OF IDAHO

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

International Autoimmune Institute

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):

BMH, Inc. C167600 98 Poplar St Blackfoot ID 83221  
(Name) (Address) (City) (State) (Zipcode)

C167600  
(Name) (Address) (City) (State) (Zipcode)

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(Name) (Address) (City) (State) (Zipcode)

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:

BMH, Inc. Attn: Jeff Daniels

(Name)  
98 Poplar St  
(Address)  
Blackfoot ID 83221  
(City) (State) (Zipcode)

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

(Name)  
(Address)  
(City) (State) (Zipcode)

Printed Name: D. Jeffery Daniels, CFO

Signature: D. Jeffery Daniels

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

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

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

08/26/2015 05:00

CK:3150118 CT:172099 BH:1489607

1@ 25.00 = 25.00 ASSUM NAME #2

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