

D 956

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

FEB 6 1 55 PM '97

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE
STATE OF IDAHO

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

Mediscript

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

Suzanne Crow ^{Name}

120 Heyburn Ave W. ^{Address}
TWIN FALLS, ID. 83301

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

#9 medical transcription

See categories on the reverse

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

Mediscript
Suzanne Crow 120 Heyburn Ave W. Twin Falls, ID. 83301

Signed

Suzanne Crow

By

Anna M. Nowood

Capacity

Notary Public for Idaho

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

DATE 02/06/1997

0900 61975 2

CK #: 2813 CUST# 76183

ASSUM NAME 10 20.00= 20.00

Revision 10/96

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