

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

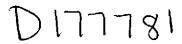
2015 MAR 24 PM 12: 36

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

Six One Six Vision Ce	nter
The true name(s) and <u>business</u> address(es business under the assumed business name	
Name	Complete Address
Ryan D. Huber, O.D., P.A.	2563 W. Tango Creek Dr.
(0204189)	Meridian, ID 83646
	n and Public Utilities
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Six One Six Vision Center 2563 W. Tango Creek Dr. Meridian, ID 83646	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
gnature: 4. (DL o	TRIVO SECREMANY OF CHARE
	IDAKO SECRETARY OF STATE
inted Name: Ryan Huber, OD Owner	03/24/2015 05:00



Printed Name: ______

Capacity/Title:___