

98 JAN 12 AM 10:29  
 CERTIFICATE OF ASSUMED BUSINESS NAME

DEC 26 AM 9:29

SECRETARY OF STATE  
 STATE OF IDAHO  
 To the SECRETARY OF STATE, STATE OF IDAHO

SECRETARY OF STATE  
 STATE OF IDAHO

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:

American Mobile Drug Testing

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

Peter John 6307 W Pinegrove, CDA, ID  
83815

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

9 Drug Testing  
 See categories on the reverse

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

Peter John dba American Mobile  
Drug Testing

Signed

[Signature]

By

PRESIDENT

Capacity

OWNER

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 #

IDAHO SECRETARY OF STATE

12/26/1997 09:00

CK: 583 CT: 84675 DN: 67386

Secretary of State use only

1 @ 20.00 = 20.00 ASSUM NAME

Revision 10/96

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