



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2015 DEC -4 PM 3:07

SECRETARY OF STATE  
STATE OF IDAHO

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

BRUCE PORTER D.D.S.

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):

BRUCE C. PORTER 5460 W. FRANKLIN RD. STE G BOISE, ID 83705  
(Name) (Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐ Retail Trade  
☐ Wholesale Trade  
☒ Services

☐ Construction  
☐ Agriculture  
☐ Manufacturing

☐ Transportation and Public Utilities  
☐ Mining  
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

BRUCE PORTER DDS  
(Name)

5460 W. FRANKLIN RD. STE G  
(Address)

BOISE IDAHO 83705  
(City) (State) (Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: BRUCE C. PORTER

Signature: [Signature]

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

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

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

12/04/2015 05:00

CK:8974 CT:317553 BH:1502968

1@ 25.00 = 25.00 ASSUM NAME #2

D183004