



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 MAR 17 AM 9:20

SECRETARY OF STATE  
STATE OF IDAHO

**Please type or print legibly.**

**Instructions are included on back of application.**

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

Selkirk Interventional Pain Specialists

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

Name

Complete Address

Idaho Pain Clinic, PLLC

(w 75312)

1327 W. Superior St, Ste A, Sandpoint, ID 83864

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

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

1327 W. Superior St, Ste A, Sandpoint, ID 83864

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

217 Cedar Street #230, Sandpoint, ID 83864

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: J. Sorin Ispirescu

Printed Name: J. Sorin Ispirescu

Capacity/Title: Managing Member

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

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

Capacity/Title: \_\_\_\_\_

Secretary of State use only

DL69747

IDAHO SECRETARY OF STATE  
03/17/2014 05:00  
CK: 18588 CT: 294427 BH: 1415652  
1 @ 25.00 = 25.00 ASSUM NAME # 3