

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

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

2007 JUN



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

Donna's Prosthetic & Prosthetic Shop

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

Name	Complete Address
<u>Donna Amyx</u>	<u>6029 Kirkwood Rd Boise, Idaho</u>
<u>Donna Amyx</u>	<u>4764 W. State St. Boise Id. 83709</u>
	<u>83708-4104</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Donna Amyx
6029 Kirkwood Rd
Boise Idaho 83709

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

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: [Signature]
Printed Name: Donna Amyx
Capacity: _____

(see instruction # 8 on back of form)

Revision 2/97

IDAHO SECRETARY OF STATE
07/18/2005 05:00
CK: 1371 CT: 150010 BH: 021021
1 @ 25.00 = 25.00 ASSUM NAME # 2

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