

CERTIFICATE OF ASSUMED BUSINESS NAME

98 JAN 27 AM 8:41

| To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idaho Code, the Assumed Business Name. | |
|--|--|
| 1. The assumed business name which the unbusiness is: | |
| ~ 100 Ld | DENTAL. |
| 2. The true name(s) and business address(es under the assumed business name is/are: | s) of the entity or individual(s) doing business |
| <u>Name</u> | Address |
| GARY V. Dixid | 1318 EUG ALB FOLD TE STO |
| MARTORIC J DIXON | - 1218 1102 1102 - 175 11 83301 |
| 3. The general type of business transacted under the assumed business name is: | |
| #9 Services | · • |
| See categories on the reverse | |
| 4. The name and address to which correspondence should be addressed: SAUTEDTHE DENTAL 1218 FILER ALE EAST Signed By Capacity | |
| Submit Certificate of Assumed | Customer # |
| Business name and \$20.00 fee to: | |
| , | Secretary of State use only |
| Secretary of State | |
| 700 West Jefferson | } |
| PO Box 83720 | |
| Boise ID 83720-0080 | TOOMO SECRETARY OF STATE |

01/27/1998 09:00 CK: 8953 CT: 93257 BH: 76468

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