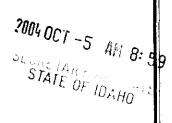
## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECT VE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



<ol> <li>The assumed business name which the und business is:</li> </ol>	
Boise accident and In	jury Center
The true name(s) and business address(es) business under the assumed business name     Name	of the entity or individual(s) doing e: Complete Address
1.15	•
rosence ig - miropra = 1 = 1 ii	5418 N. Eagle Rd. Ste 110 Boise ID, 83713
C153052	
3. The general type of business transacted und	der the assumed business name is:
Tretail Hade	and Public Utilities
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  3511 E. Judicial Dr  Meridian TO 83642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt Phone number (optional):
	Secretary of State use only
ignature: In Rosenberg P.C.,  rinted Name: Sames Rosenberg P.C.,  apacity/Title: Owner  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  10/05/2004 05:06  CK: 2026 CT: 158010 BH: 76957  1 0 25.00 = 25.00 ASSUM NAME