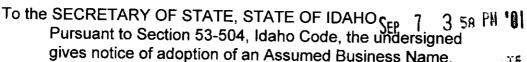
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





, ,	Pursuant to Section 53-504, Idaho Co- gives notice of adoption of an Assume	ode, the undersigned	
1.	The assumed business name which the u business is:	undersigned use(s) in the transaction of	
	Intermountain Pet Hospital		
2.	The true name(s) and business address(e business under the assumed business name	es) of the entity or individual(s) doing ame is/are: <u>Complete Address</u>	
		<u>Gomplete Address</u>	
	Intermountain Animal Hospital	800 West Overland Road Meridian, Idaho 83642	
	<u> </u>		
3.	The general type of business transacted u (mark only those that apply)	general type of business transacted under the assumed business name is:	
2	Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate	
	The name and address to which future Fcorrespondence should be addressed:	Phone number (optional):	
	Robert Beede, D.V.M.	Submit On tiff 1	
	800 West Overland Road	Submit Certificate of Assumed Business	
•	Meridian, Idaho 83642	Name and \$20.00 fee to:	
	Name and address for this acknowledgmer copy is (if other than # 4 above): Scot M. Ludwig 877 West Main, Suite 506	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
_	Boise, Idaho 83702	Secretary of State use only	
	181P 25	wisian 2/9.	

IDAHO SECRETARY OF STATE
49/14/2001 05:00
CK: 3873 CT: 35583 BH: 418285
1 8 20.00 = 20.00 ASSUM NAME # 2

D4 8208

Signature: / // Leall

Printed Name: Robert Beede, D.V.M.

Capacity:_ Member

(see instruction # 8 on back of form)