

CERTIFICATE OF ASSUMED BUSINESS NAME

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

03 APR -3 AMII: 44

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: Millennium Health Solutions	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Stephen Pillott	Complete Address 398 S. River Rush Lane Suite 201 Eagle, ID 83616
3. The general type of business transacted under Metall Trade Transportation a Wholesale Trade Construction Agriculture Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Millennium Health Solutions 398 S River Rush Lane Suite 201 Eagle, ID 83616 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
Signature: Steph Pollott Printed Name: Stephen Pillott Capacity/Title: Owner/President/CEO	Secretary of State use only Company Compa