

# CERTIFICATE OF ASSUMED BUSINESS NAME

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.

97 MAY 21 AM 10:02  
SECRETARY OF STATE  
STATE OF IDAHO

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

~~INTERMOUNTAIN~~ INTERMOUNTAIN THERAPEUTICS

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

<u>Name</u>	<u>Address</u>
<u>MICHAEL PANTOJA</u>	<u>2235 EAST 25th Street Suite 150</u>
	<u>Idaho Falls Idaho 83404</u>

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:

Same as above

Signed

Michael Pantoja

By

Capacity Owner

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

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE  
DATE 05/21/1997  
0900 94810 2  
CX #: 375 CUST# 81774  
ASSUM NAME 10 20.00= 20.00

Revision 10/98

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