



# CERTIFICATE OF ASSUMED BUSINESS NAME

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.**

**FILED/EFFECTIVE**  
02 FEB - 7 AM 8:41  
STATE OF IDAHO

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

INTEGRATIVE HEALTH SERVICES

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

<u>Name</u>	<u>Complete Address</u>
<u>SEWEST MEDICAL SERVICES, Corp.</u>	<u>2824 POLELINE RD.</u>
<u>C139631</u>	<u>POCATELLO, ID</u>
	<u>83201</u>

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

4. The name and address to which future correspondence should be addressed:

SEWEST MEDICAL SERVICES Corp.  
2824 POLELINE RD.  
POCATELLO, ID 83201

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-238-1171

Secretary of State use only

Signature: Mark Semons

Printed Name: MARK SEMONS

Capacity/Title: CFO/Co-Founder

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE  
02/07/2002 05:00  
CK: 2238 CT: 156833 BH: 444879  
1 @ 20.00 = 20.00 ASSUM NAME # 2

DS1849