



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 EFFECT

JUN 30 AM 9:26

SECRETARY OF STATE
STATE OF IDAHO

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

Gentle Dental Care

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

Name

Complete Address

Ronald Mendenhall D.D.S.

101 W. Main St. Ste. 100
Boise ID
83854

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

- ☐ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Same as above

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

Phone number (optional):

208 773-4581

Signature:

Ronald E. Mendenhall D.D.S.
(signature required)

Printed Name:

RONALD E. MENDENHALL
D.D.S.

Capacity/Title:

Owner

(see instruction # 8 on back of form)

Secretary of State use only

D101443

IDAHO SECRETARY OF STATE
06/30/2006 05:00
CK: 1324 CT: 201967 BH: 962961
1 @ 25.00 = 25.00 ASSUM NAME # 2