

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF	
ASSUMED BUSINESS I	NAME indersigned ness Name. ation.
Pursuant to Section 53-504, Idaho Code, the u	indersigned
submits for filing a certificate of Assumed Busi	ness Name.
Please type or print legibly. Instructions are included on back of applic	ation.
 The assumed business name which the under business is: 	
HYPERBARICS OF S	UN VALLEY
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
Name HYPERRARIC CENTERS 2	Complete Address
	1 comet LANE SWIEA
OF IDAHO LLC H	A1LEY - 10 83333
(ω113414)	
The general type of business transacted under the assumed business name is:	
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: HYPERBARICS OF SWN UALLERATIN: PHILLIP RAINEY 21 COMET LANG - SWITCH	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment	HAILEY - 10 83333
CODY IS (if other than # 4 above):	
Signature: The Care	Secretary of State use only
Printed Name: PHILLIP RAINEY	
Capacity/Title: OWNER	
Signature:	
Printed Name:	TRAIL CECRETARY OF STATE
Capacity/Title:	IDAHO SECRETARY OF STATE @4/26/2012
	CK: 1093 CT: 269747 BH: 1321527 1 @ 25.00 = 25.00 ASSUM NAME # 3