

227

FILED EFFECTIVE



**CERTIFICATE OF
ASSUMED BUSINESS NAME**

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2017 NOV -1 AM 11: 42

SECRETARY OF STATE
STATE OF IDAHO

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

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Back 2 Life Medical Inc. 2016 S Eagle Rd Meridian ID 83642

(Name)

(Address)

C210549

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Back 2 Life Medical Inc

(Name)

2016 S Eagle Rd

(Address)

Meridian

(City)

ID

(State)

83642

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Justin Griffin

Signature: [Signature]

Printed Name: [Signature]

Signature: [Signature]

Printed Name: [Signature]

Signature: [Signature]

Secretary of State use only

IDAHO SECRETARY OF STATE

11/01/2017 05:00

CK:15085980 CT:172099 BH:1610080

10 25.00 = 25.00 ASSUM NAME #2

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