

D356

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.

JAN 17 6 24 AM '97
STATE OF IDAHO

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

Lost Rivers Dental

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

Name

Address

Channing Way Dental Care, PLLC

2205 Channing Way, Idaho Falls, ID 83401

520 Highland Drive, Arco, ID 83213

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

Services

See categories on the reverse

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

Channing Way Dental Care, PLLC, c/o Karl R. Decker, Meacham & Decker, PLLC,

1970 E. 17th Street, Ste. 103, Idaho Falls, ID 83404

Signed

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

Revision 10/96

IDAHO SECRETARY OF STATE
DATE 01/17/1997 0900 56097

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CK #: 1271 CUST# 70674

ASSUM NAME

1@ 20.00= 20.00