227	FILED
CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business N Please type or print legibly. NOTE: See instructions on reverse before filing.	igned 4/1 o.
1. The assumed business name which the undersigne business is:	
2. The true name(s) and business address(es) of the obusiness under the assumed business name: Name <u>JAMES C. Park</u> 25	entity or individual(s) doing Complete Address <u>-D Northwest Blud Sui</u> te 106A eur d'Alene, Id 83844
 3. The general type of business transacted under the a Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Dr Jim Park + Associates 250 Northwest Blud #1064 Coe und Alewe, Id 83814 	
 Name and address for this acknowledgment COPY is (if other than # 4 above): 	Phone number (optional): 208- 664-4533
Signature: (signature required) Printed Name: Tames Park Capacity/Title: OWNER (see instruction # 8 on back of form)	Secretary of State use only IDANO SECRETARY OF STATE @1/16/2004 @5:00 CK: 1009 CT: 150019 BH: 72223 1 8 25.00 = 25.00 ASSUM NAME # 2 D 7 2 2 13