



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2005 SEP -6 PM 8:55



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.

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

MEDICAL SPECIALTIES CLINIC

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

Name

APEX STANDARD SERVICES, LLC

W 17586

Complete Address

500 S. 11TH AVE. SUITE 504

POCATELLO, ID 83201

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

APEX STANDARD SERVICES, LLC

500 S. 11TH AVE. SUITE 504

POCATELLO, ID 83201

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

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

ERIC OLSEN

201 EAST CENTER, P.O. BOX 1391

POCATELLO, ID 83204

Phone number (optional):

Signature:


(signature required)

Printed Name: Scott Honeycutt

Capacity/Title: MEMBER

(see instruction # 8 on back of form)

Secretary of State use only

9 corpformstatbn formstatbn p65
Revised 04/2003

IDABO SECRETARY OF STATE
09/06/2005 05:00
CK: 4686 CT: 192036 BH: 910179
1 @ 25.00 = 25.00 ASSUM NAME # 2

D91393