

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2011 AUG 17 PM 3:42

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
Instructions are included on back of application.

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

Fairview Dental Associates

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

Name

Complete Address

Platinum Dental PLLC

329 E Logan St, Caldwell, ID 83605

W 105820

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Platinum Dental PLLC

329 E Logan St

Caldwell, ID 83605

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

Rich Davis

3550 Ave B

Council Bluffs, IA 51501

Signature: Richard Davis

Printed Name: Richard Davis

Capacity/Title: Owner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/17/2011 05:00
CK: 768532 CT: 172099 BH: 1286947
1 @ 25.00 = 25.00 ASSUM NAME # 2

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