

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on other page)

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.

FILED

SEP 19 1999 10:39
STATE OF IDAHO

1. The assumed business name which the undersigned uses in the transaction of business is:

ALPINE CHIROPRACTIC CENTER

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

<u>Name</u>	<u>Complete Address</u>
<u>JAMES N. ANDERSON</u>	<u>W. 296 Sunset Ave. #15, Coeur d'Alene, ID 83814</u>
<u>KRISTINE ANDERSON</u>	<u>W. 296 Sunset Ave. #15, Coeur d'Alene, ID 83814</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): _____

ALPINE CHIROPRACTIC CENTER
W 296 SUNSET AVE. #15
COEUR d'ALENE, ID 83814

Submit Certificate of Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID, 83720-0080
(208) 334-2301

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

FIRST SECURITY BANK N.A.
COMMERCIAL LOAN DOCUMENTATION CENTER
P.O. BOX 8203
BOISE, IDAHO 83707

Signature: *James N. Anderson*
Printed Name: JAMES N. ANDERSON
Capacity: OWNER

Signature: *Kristine Anderson*
Printed Name: KRISTINE ANDERSON
Capacity: OWNER

(see instruction #7 on other sheet)

Secretary of State Use Only

IDAHO SECRETARY OF STATE
08/06/1999 09:00
CK: 218867834 CT: 118914 BH: 248114
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 28234