

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 MAR 18 AM 8: 28

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

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WestVet Diagnos	IC Labor	atory	
2. The true name(s) and business address(es) of business under the assumed business name: Name WestVet Veterinary Diagnostic Laboratory, L		tity or individual(s) doing Complete Address Sawyer Ave, Garden City, ID 837	714
(₩90474) 3. The general type of business transacted under ☐ Transportation a			
Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: WestVet Diagnostic Laboratory 3085 E Magic View Dr., Suite 110		Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
Meridian, ID 83642 5. Name and address for this acknowledgment copy is (if other than # 4 above): WestVet	t		
5019 N Sawyer Ave		Secretary of State use only	
Garden City, ID 83714 Inature: (signature required) John Chandler Ipacity/Title: (see instruction # 8 on back of form)	g/corpt/oms/abn forms/abn.p65 Refised 04/2003	IDAHO SECRETARY 93/18/291 CK: 1896 CT: 246878 1 8 25.08 = 25.00	OF STATE OS = 0 BH: 12134 ASSUM NAME

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