

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

00 MAY 12 AM 10:51

SECRETARY OF STATE
STATE OF IDAHO

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

Eagle Sports and Orthopedic Physical Therapy

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

Name	Address
<u>Michael Bleffert</u>	<u>9W. East Rendezvous, Driggs, ID</u>
<u>Christine Lundberg-Bleffert</u>	<u>9W. East Rendezvous, Driggs, ID</u>

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

Health services - physical therapy

See categories on the reverse

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

Michael & Christi Bleffert / ESOPT
9W. East Rendezvous, Driggs, ID 83422

Signed March 30, 2000

By Christine Lundberg-Bleffert

Capacity Partner/Sole Proprietor

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

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

525-7116

Customer #

IDAHO SECRETARY OF STATE
Secretary of State use only
05/12/2000 09:00
CK: 353 CT: 131002 BH: 317435

1 @ 20.00 = 20.00 ASSUM NAME # 2

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