

## **CERTIFICATE OF** ASSUMED BUSINESS NAME NOV -9 AM 9: 04

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name CRETARY OF STATE OF IDAHO Please type or print legibly.

NOTE: See instructions on reverse before filing.

business is:  Young Dental Labor	and the second of the second o
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Ryan Young	Complete Address  Z3 Y S . Emerson Sheller, TD 83274
3. The general type of business transacted under Retail Trade 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:  238 S. Euro Solv Stelley TD.	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
5. Name and address for this acknowledgmen copy is (if other than # 4 above):  Signature:  (signature required)  Printed Name:  Capacity/Title:  (see instruction # 8 on back of form)	Secretary of State use only    Secretary of State use only

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