CERTIFICATE OF ASSUMED BUSINESS NAME COLORS type or print legibly. See instructions on reverse.) (Please type or print legibly. See instructions on reverse.) TATE STATE OF IDAHO SECURITY AND RESERVED AND RES Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Doctors Business Bureau 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 028827 Complete Address Name Doctors Business Bureau, Inc. 1214 Johnson Street Boise, Idaho 83705 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 208-342-8407 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: Doctors Business Bureau, Inc. Submit Certificate of **Assumed Business** 1214 Johnson Street Name and \$20.00 fee to: Boise, Idaho 83705 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only INANO SECRETARY OF STATE Signature:_Cluwellpue 12/31/1998 69:06 CK: 1252 CT: 166861 BH: 174596 1 8 28.80 = 28.88 ASSUM WANE # Printed Name: Edward W. Rice D21512 President Capacity:

(see instruction # 8 on back of form)