



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2006 JUL 20 AM 8:48

SECRETARY OF STATE
STATE OF IDAHO

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

Valley View Family Dental

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

Name	Complete Address
G. William Godfrey DDS. and	1777 East Clark Suite 330
Lee R. Reddish DDS. PLLC	Pocatello Id. 83201
(W10473)	

Old address

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

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

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

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

New address: 1980 Birdie Thompson Drive
Pocatello, Id. 83201

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

Phone number (optional):

208-233-8750

Signature:

G. William Godfrey
(signature required)

Printed Name: G. William Godfrey, Reddish

Capacity/Title: owner / Partner

(see instruction # 8 on back of form)

Secretary of State use only

D101986

IDAHO SECRETARY OF STATE
07/20/2006 05:00
CK: 5162 CT: 124111 BH: 965931
1 @ 25.00 = 25.00 ASSUM NAME # 2