

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2015 APR -7 AM 8: 36

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE

	STATE OF IDAHO
The assumed business name which the unders business is:	signed use(s) in the transaction of
Northwestern Practice Solutions	
The true name(s) and <u>business</u> address(es) of business under the assumed business name:	the entity or individual(s) doing
<u>Name</u>	Complete Address
Chronos Consulting, LLC 903	30 N Hess St, #251
(N123578) Hay	yden, Idaho 83835
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture	
☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Chronos Consulting, LLC	Secretary of State 450 North 4th Street PO Box 83720
9030 N Hess Street, #251 Hayden, ID 83835	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
ignature:	
rinted Name: David Clinton III	IDAHO SECRETARY OF STATE 04/07/2015 05:00
apacity/Title: Member	CK:3135 CT:281181 BH:146975
gnature:	16 25.00 = 25.00 ASSUM NAME
rinted Name:	*
apacity/Title:	1)178116