D 453

## 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 state		
1. The assumed business name which the undersigned use(s) in the transaction of		
	business is:	
	Southridge Den	tal Property
	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Stanlau R + 1 : DD 2	Address 2800 - 12th Ave. Rd. Nampa Jd
	Similed D. Till, DDS 2	xolu - 10m Mue. Ka. Nampa Id
	Elisabeth Ilin	<i>h</i>
	David L. Farris, DDS	
2		
J.	3. The general type of business transacted under the assumed business name is:	
Services		
See categories on the reverse		
4. The name and address to which correspondence should be addressed:  Stanley B. Ilin, DDS.  address above		
Signed Scuthridge Dental Property,  By Wardy S. Kin JBS		
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer#
	Secretary of State	Secretary of State use only
	700 West Jefferson	I
	PO Box 83720 Boise ID 83720-0080	IDANO SECRETARY OF STATE
	DOISE ID 03/20-0080	🎁 Transport of the Control of the C
	Time to the second of the seco	CK 1: 15899 CUST# 45880 ASSUM NAME 18 20.00= 20.00