

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 11 Jan 25 Fil 3: 43

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

STATE OF IDAHO

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

The Pet Hospital	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Priscilla R. H. Pulver, DVM, P.C. (C1895)	Complete Address
	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Priscilla R. H. Pulver, DVM, P.C. 5100 N. Star Road Meridian, Idaho 83646	1 DEGELERY DISIBLE
5. Name and address for this acknowledge copy is (if other than # 4 above):	pment
	Secretary of State use only
Printed Name: Priscilla R. H. Pulver	
Capacity/Title: President	
Signature:	IDAHO SECRETARY OF STATE 01/26/2011 05:00 CK: 8325 CT: 64588 BH: 1257121
Printed Name:	1 8 25.80 = 25.88 ASSUM NAME # 2
Capacity/Title:	D144849

abn prnd Rev. 07/2010