## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2005 NOV -9 AM 9: 32

FILED ETTESTIVE

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF STATE

business is:  Rocky Mountain GYN and He	ormone Center
The true name(s) and business address(es) of the business under the assumed business name:  Name  Rocky Mountain OBGYN, PLLC  W 25749	e entity or individual(s) doing  Complete Address  951 East Plaza Dr #170  Eagle,Idaho 83616
The general type of business transacted under the	
Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Rocky Mountain GYN and Hormone Center  P.O. Box 757  Eagle, Idaho 83616	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
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above).</li> </ol>	Phone number (optional):  208-939-3505
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE  11/09/2005 05:  CK: 1567 CT: 158018 BH: 9:  1 8 25.00 = 25.00 ASSUM NA

)93482