

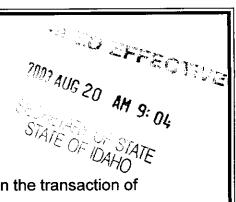
CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction #8 on back of form)



The assumed business name which the under business is:	ersigned use(s) in the transaction of
Intermountain Medical Bi	illers
	Complete Address 1800 MT. VICW Dr. McCammun 83,250
 3. The general type of business transacted under land land land land land land land land	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
	Secretary of State use only
Signature: Breiding Batty Printed Name: Brenda Bates Capacity/Title: President	IDAHO SECRETARY OF STATE 98/20/2003 05 = 00 CK: 2281 CT: 158010 BH: 697355 1 8 25.00 = 25.00 ASSUM NAME # 2