

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



FILED/EFFECTIVE  
JAN 11 2000  
STATE OF IDAHO

To the SECRETARY OF STATE, STATE OF IDAHO  
Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of  
business is:

Outsource Med.

2. The true name(s) and business address(es) of the entity or individual(s) doing  
business under the assumed business name is/are:

Name	Complete Address
<u>Jeffrey Poore</u>	<u>2385 S. 300 W. Salt Lake City 84115</u>
<u>Kerina Blauer</u>	<u>179 S. 100 W. Burley, ID 83308</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

4. The name and address to which future  
correspondence should be addressed:

Phone number (optional): 208-734-2720

371 Locust South  
Twin Falls ID 83301

5. Name and address for this acknowledgment  
copy is (if other than # 4 above):

Zions Bank  
102 W. Main  
Burley, ID 83318

Signature: *Kerina Blauer*  
Printed Name: Kerina Blauer  
Capacity: General Manager -

(see instruction # 8 on back of form)

Submit Certificate of  
Assumed Business  
Name and \$20.00 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

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IDAHO SECRETARY OF STATE  
08/31/2000 09:00  
CK: 136603688 CT: 86138 BH: 345467

1 @ 20.00 = 20.00 ASSUM NAME # 2

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