

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.

Caldwell Pr	ysical Thera	oy
The true name(s) and business address(es business under the assumed business name Name Rulin J. Hawks, P.T., P.L.L.C.	e:	ity or individual(s) doing Complete Address S. 10th Ave., Caldwell, ID 83605
W 31795		
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction		
Services		Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Rulin J. Hawks, P.T., P.L.L.C. 1902 S. 10th Ave. Caldwell, Idaho 83605		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	t F	Phone number (optional):
Murphy Law Office, PLLC PO Box 339		
Caldwell, Idaho 83606		Secretary of State use only
nature:	g'vcorpt/ormstabn formstabn.p65 Revised 04/2003	IDAHO SECRETARY OF STATE O7/09/2004 05:00 CK: 6481 CT: 136571 BH: 75454

D 78087