

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO 00 AUG -9 PH 4: 25  
 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of  
 adoption of an Assumed Business Name.

SECRETARY OF STATE  
 STATE OF IDAHO

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

IDAHO COMPONENT INTERNATIONAL COLLEGE OF DENTISTS

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

Address

Hal Pickett

814 LaCassia Boise, ID. 83705

3. The general type of business transacted under the assumed business name is:

Services

See categories on the reverse

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

IDAHO COMPONENT INTERNATIONAL COLLEGE OF DENTISTS

814 LaCassia Boise, ID. 83705

Signed

[Signature]

By

Capacity

Deputy Report

Submit Certificate of Assumed  
 Business Name and \$20.00 fee to:

Secretary of State  
 700 West Jefferson  
 PO Box 83720  
 Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

08/10/2000 09:00  
 CR: 434 CT: 134620 BH: 340370

1 \* 20.00 = 20.00 ASSUM NAME # 2

Revision 10/98

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