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CERTIFICATE OF ASSUMED BUSINESS NAME

	the SECRETARY OF STATE, STATE OF II Pursuant to Section 53-504, Idaho Code option of an Assumed Business Name.	DAHO the undersigned gives notice of
1,	The assumed business name which the undersigned use(s) in the transaction of business is: how valley clinic	
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 DAVID BURICA, MO PO ISCA AZ MCCERE, ID 850 (8)	
		POBOXAZ McCall TO83638
3.	The general type of business transacted un	der the assumed business name is:
4.	The name and address to which correspondence should be addressed:	
	Signed By Capacity	
	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 DATE 01/09/1997 0900 53547

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ASSUM NAME 20.00 20.00