

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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:

Teton Valley Health 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

Complete Address

Kieran Meehan

PO Box 503

Victor ID 83455

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:

Po Box 503

Victor ID 83455

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

Key Blank N.A.

15 N Main

Driggs, Id 83422

Signature: K. Meehan

Printed Name: Kevin Meehan

Capacity: \_\_\_\_\_

(See Instruction # 8 on back of form)

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:  
25.00  
Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

DM4223

IDaho SECRETARY OF STATE  
03/16/2004 05:00  
CK: 814072458 CT: 98147 BH: 733351  
1 @ 25.00 = 25.00 ASSUM NAME # 2

FILED EFFECTIVE/MAY 9: 07