

FILED EFFECTIVE



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.

Instructions are included on back of application.

2012 SEP 24 AM 10:08
SECRETARY OF STATE
STATE OF IDAHO

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

ActivStyle

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

Name

Complete Address

Senior Care Services, Inc.

565 S. Commercial Drive

(C196035)

Grand Junction, CO 81505-6900

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

c/o ActivStyle, Inc.

1701 Broadway Street NE

Minneapolis, MN 55413-2638

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

Shawn Hollembeak

80 S. Eighth Street, Suite 4545

Minneapolis, MN 55402

Signature: Robert P. Penvose, Jr.

Printed Name: Robert P. Penvose, Jr.

Capacity/Title: CFO

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
09/24/2012 05:00
CK: 14889 CT: 273022 BH: 1340925
1 @ 25.00 = 25.00 ASSUM NAME # 3

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