



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

NOV 15 2001 8:57

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

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

A Compassionate Care co.

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

Compcare Inc.
C 141528

150 126th Street Suite B
Orofino ID 83544

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

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

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

A Compassionate Care co.
150 126th St. Suite B
Orofino ID 83544

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

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

(208) 476-3714

Secretary of State use only

Signature:

Gerald L Hosley Sr

Printed Name:

Gerald L Hosley Sr.

Capacity:

President

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE
11/15/2001 05:00
CK: 3475 CT: 153423 BH: 429786
1 @ 20.00 = 20.00 ASSUM NAME # 2

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