BLMH PR

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 DEC 10 PN 3: 37 SECRETARY OF STATE STATE OF TOAHO

Please type or print legibly.

The assumed business name which the ubusiness is: Bear Lake Memorial Host	
2. The true name(s) and business address(e business under the assumed business name Name Bear Lake Valley Health Care Found (C 118300)	ame: <u>Complete Address</u>
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	on and Public Utilities Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Bear Lake Memorial Hospital Auxiliary 164 S 5th Str. Montpulier JD 83254	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
gnature: Audy Hitzsimmans inted Name: Budy Fitzsimmons apacity/Tipe: Rivector of Volumeer Service	Secretary of State use only
inted Name: Craig Thomas apacity/Title: Exec. Biredor	IDAHO SECRETARY OF STATE 12/10/2012 05:00 CK: 1219746 CT: 172099 BH: 1350 1 0 25.00 = 25.00 ASSUM NAME

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