227

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2005 SEP 12 PM 1:20

SECRETARY OF STATE
STATE OF IDAHO

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: By His Grace Care Home

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
Steve & Michelle Davis	2807 Carnegie - Caldwell, Id. 83607

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

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

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

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

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

By His Grace Care Home
24472 Walker Rd
Parma, Idaho 83660

Phone number (optional):

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

Signature: [signature] (signature required)

Printed Name: Michelle Davis

Capacity/Title: Administrator

(see instruction # 6 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
09/12/2005 05:00
CK: 611290 CT: 172099 BH: 911055
1 @ 25.00 = 25.00 ASSUM NAME # 2

D91567

FROM : APPLE LUCYS FAX NO. : 722 7293 Sep. 12 2005 12:17PM P2