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.

02 JAN 31 Ait 8: 41

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

Air S	t. Luke's
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name St. Luke's Regional Medical Center, Ltd.	
3. The general type of business transacted until Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	nder the assumed business name is: n and Public Utilities Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Janine Sarti, Esq. 190 E. Bannock Boise, ID 83712	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional): (208) 381-3595
	Secretary of State use only
inted Name: Janine Sarti, apacity/Title: V. P. Chief Legal Officer	IDANO SECRETARY OF STATE 91/31/2002 95:6 CK: 3195 CT: 71254 BH: 4434