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.

NOTE: Say instructions on reverse before filing.

2003 MAR 13 PM 12: 01

STATE OF IDAHO

Mountain States Medical Research Institute	
2. The true name(s) and business address(es) of	f the entity or individual(s) doing
business under the assumed business name: Name	Complete Address
Mountain States Tumor Institute, Inc.	100 E. Idaho St., Boise ID 83712
(C-41697)	
3. The general type of business transacted under Retail Trade Transportation an	i
 Whole: ale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
Janine Sarti - St. Luke's Regional Med Ctr.	PO Box 83720
190 E. Bannt ck	Boise ID 83720-0080
Boise, ID 83 12	208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional): 381-1165
	Secretary of State use only
Signature:	1DAHO SECRETARY OF STATE 03/13/2003 05:00 CK: 1000029181 CT: 71254 BH: 6683 1 @ 20.08 = 20.08 ASSUM NAME #