

## 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.

2815 FEB -2 AM 9: 42

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the ubusiness is:	indersigned use(s) in the transaction of
Heritage Seni	or Living
The true name(s) and <u>business</u> address(estable) business under the assumed business name     Name	ame:
	Complete Address
Golden Age Alternatives Inc.	Preston. ID 83263
	113/011, 40 80065
3. The general type of business transacted	under the assumed business name is:
Wholesale Trade Construction	on and Public Utilities n
X Services	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estat	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street PO Box 83720
P.O. Box 47	Boise ID 83720-0080
Preston, ID 82063	208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ent
	Secretary of State use only
Signature: / hwa Mark	IDAHO SECRETARY OF STATE
Printed Name: Brunn Martin	02/03/2015 05:00
Capacity/Title: President / Serretary	CK:24491 CT:249293 BH:1459983 16 25.00 = 25.00 ASSUM NAME #2
Signature:	

D176465

Printed Name: Capacity/Title: