CERTIFICATE OF ASSUMED BUSINESS NAME

| To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of additional adoption of an Assumed Business Name. | |
|---|--|
| The assumed business name which the undersigned use(s) in the transaction of business is: IDAHO HEALTH COMMUNICATIONS | |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | |
| BARRETT F. RAINEY | Address 2666 N. Peregrine, Boise, ID 83702 |
| | 1 |
| The general type of business transacted under the assumed business name is: | |
| (9) Services | |
| 4. The name and address to which correspondence should be addressed: BARRETT F. RAINEY, P.O. Box 422, Boise, ID 83701 | |
| Sign | ed BARRETT F. RAINEX |
| • | acity Owner |
| Submit Certificate of Assumed Business Name and \$20.00 fee to: | Customer # |
| | Secretary of State use only |
| Secretary of State | 96 |
| 700 West Jefferson | IDANO SECRETARY OF STATE BOTE 01/07/1997 0900 52742 |
| PO Box 83720 | |
| Boise ID 83720-0080 | 2 CX #: 1468 CUST# 74331 ASSUM NAME 10 20.00= 20.00 |