

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: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the und business is:	lersigned use(s) in the transaction of
	n Care Services
2. The true name(s) and business address(es) business under the assumed business name Name	of the entity or individual(s) doing e: Complete Address 8898 Austin 5t. Boise, ID 83714
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	der the assumed business name is: and Public Utilities 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
5. Name and address for this acknowledgmen copy is (if other than #4 above):	Phone number (optional): (209) 794-1372
8898 Austin St.	Secretary of State use only
Signature: Jest Permolds Printed Name: Jack Reynolds Capacity/Title:	IDAHO SECRETARY OF STATE ### OF A CK: 200202 CT: 158010 BH: 1062087 1 8 25.00 = 25.00 ASSUM NAME # 2