



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2015 MAY 15 AM 10:11

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 undersigned use(s) in the transaction of business is:

Brookdale Boise Parkcenter

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Brookdale Senior Living Communities, Inc.

111 Westwood Pl., Ste 400, Brentwood, TN 37027

C114980

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Jamie Curry, Brookdale Senior Living, Inc.

111 Westwood Place Suite 400

Brentwood, TN 37027

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Kimberly King, Brookdale Senior Living, Inc.

111 Westwood Place, Suite 400

Brentwood, TN 37027

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Bryan D. Richardson

Printed Name: Bryan D. Richardson

Capacity/Title: EVP

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/15/2015 05:00

CK:3327314 CT:221665 RH:1475654
1@ 25.00 = 25.00 ASSUM NAME #3

D179049