FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

2014 JAN 31 PM 1: 01

SECRETARY OF STATE STATE OF IDAHO

| (Please type or print legibly. Instructions are included on the back of the application.) | |
|---|--|
| 1. The assumed business name is: XL Palliative C | are Consultation |
| 2. The assumed business name was filed with the on 11-6-2006 as file number 0/05 291 | |
| 3. Cancellation. The persons who filed the the above assumed business name and | certificate no longer claim an interest in cancel the certificate in its entirety. |
| 4. The assumed business name is amended to: | |
| 5. The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow: | |
| Add: Delete: Name: | Address: |
| XL Hospice, Inc. (C91650) | 2480 Highway 52, Payette, ID 83661 |
| Northwest Hospice, LLC (w /3/5 | 335) ₂₄₈₀ Highway 52, Payette, ID 83661 |
| | |
| 6. The type of business is amended to read: | |
| Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Mining | |
| Services Construction | Finance, Insurance, and Real Estate |
| 7. The name and address to which future correspondence should be addressed is changed to read; | |
| Lawrence Lopardo, 25117 SW Parkway, Sulte F, Wilsonville, OR 97070 | |
| Name and address for this acknowledgment co Lawrence Lopardo | py is: |
| 25117 SW Parkway, Suite F | |
| Wilsonville, OR 97070 | |
| Signature: Dujut &D. | Secretary of State use only |
| Printed Name: DWIGHTF, OLSOW | • |
| Capacity: PRESIDENT | |
| Signature: | |
| Printed Name: Robert Thomas | |
| Capacity: President of Northwest Hospice, LLC | IDAHO SECRETARY OF STATE 01/31/2014 05:00 CK: NONE CT: 3848 RN: 1488626 |

1 0 10.00 = 10.00 ASSUM AMEN # 2

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