

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.

2000 JUN 15 MI C: 04

Please type or print legibly. NOTE: See instructions on reverse before filing.

| 1. The assumed business name which the und business is: THERAPEUTIC HOUSE Therapeutic | dersigned use(s) in the transaction of CALLS CALLS |
|---|---|
| 2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name MARK OTABOLINE | of the entity or individual(s) doing : <u>Complete Address</u> <u>ろ979 <i>E. IOON</i> おもり チカ 834</u> 42 |
| Wholesale Trade ☐ ConstructionServices ☐ AgricultureManufacturing ☐ Mining | and Public Utilities Submit Certificate of Assumed Business |
| Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Therapportic House Calls 3979 £ 100 N Righy FD 8344 Z | Name and \$20.00 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): 208-745-517-1 |
| | Secretary of State use only |
| Signature: Scale Scale Scale | IDAHO SECRETARY OF STATE O1/15/2003 05:00 CX: 1894 CT: 158818 BH: 657818 1 8 28.88 SSUM NAME 2 |