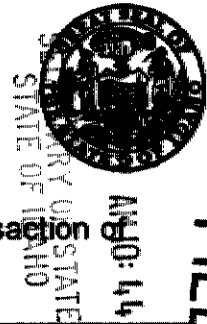


CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.



FILED

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Clearwater Health and Rehabilitation

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

Name

Complete Address

See 1 in Addendum

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): (770) 730-1103

Tracey C. Cosby

400 Perimeter Center Terrace, Suite 650

Atlanta, GA 30346

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

11/20/1997 09:00
CX: 101048630 CT: 69776 BH: 57855

1 @ 20.00 = 20.00 ASSUM NAME

09888

Signature: Tracey C. Cosby

Printed Name: Tracey C. Cosby

Capacity: Assistant Secretary
(see instruction #8 on back of form)

Addendum

1. **Name:** Centennial HealthCare Properties Corporation
Address: 400 Perimeter Center Terrace, Suite 650, Atlanta, GA 30346