



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE
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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.

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

Alpine Home Health 2300 North Yellowstone, Suite 206
Idaho Falls, Idaho 83401

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

<u>Name</u>	<u>Complete Address</u>
<u>Alpine Health Group, Inc.</u>	<u>310 North 2nd East, Suite 147</u>
	<u>Rexburg, Idaho 83440</u>

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:

Alpine Health Group, Inc.
310 North 2nd East, Suite 147
Rexburg, Idaho 83440

Phone number (optional): _____

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

Jeff Carter, President
Alpine Health Group, Inc.
P. O. Box 391, Teton, Idaho 83451

Signature: Jeff Carter

Printed Name: Jeff Carter

Capacity: Corporate president

(see instruction # 8 on back of form)

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

02/15/2000 09:00
 CK: 1798 CT: 126760 BH: 290395

1 @ 20.00 = 20.00 ASSUM NAME # 4

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Revision 1/98

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