## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Businese Warran The assumed business name which the undersigned use(s) in the transaction of usiness is: Arizona Home Medical The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name
Home Medical & More, L.L.C. 2615 N 4th St., Ste. 527 Coeur d'Alene ID 83815 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Finance, Insurance, and Real Estate Agriculture Services Construction Minina

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

David Westover 2615 N 4th St., Ste. 527

Coeur d'Alene ID 83815

5. Name and address for this acknowledgment CODY 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

18/04/1999 09:00 (X: 4404:前面號配面報: 285183

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Signature 3

Printed Name: David Westover

Capacity: Manager

(see instruction # # on back of form)