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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: MRI Associates 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 78325 int Alphonsus Diversified Care. Inc. 1055 N. Curtis Rd., Boise, ID 83706 76124 ______ 1512 12th Ave. Road. Nampa. ID 83686 \$3789 West Valley Medical Center, Inc. 1717 Arlington Ave. Caldwell, ID 83605 SEE ATTACHED 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 Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: Jeffrey R. Cliff Submit Certificate of Assumed Business P.O. Box 8359 Name and \$20.00 fee to: Boise, ID 83707 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 Same 208 334-2301 Secretary of State use only IDANO SECRETARY OF STATE 12/31/1998 09:00 CX: 820852880 CT: 103902 BH: 174767 Signature:_ 1 8 20.00 = 28.00 ASSUM NAME # 5 Printed Name: Karl Kurtz Capacity: Member, Board of Partners

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

MRI ASSOCIATES

2. (Continued)

The Dominican Sisters of Ontario, Inc. 351 S.W. 9th Street Ontario, OR 97914

Doctors Magnetic Resonance, Inc. P.O. Box 8359 Boise, ID 83707