



# 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.

2004 OCT 12 PM 2:55

Please type or print legibly.

NOTE: See instructions on reverse before filing.

DEPT. OF STATE  
STATE OF IDAHO

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

Spirit Lake Family Care

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

Name

Complete Address

Donald A. Baker, M.D., P.A.

32168 N. 5th Ave., Spirit Lake, ID 83869

P. O. Box 766, Spirit Lake, ID 83869

3. The general type of business transacted under the assumed business name is:

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

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

Donald A. Baker, M.D., P.A.

Spirit Lake Family Care

P. O. Box 766, Spirit Lake, ID 83868

Submit Certificate of  
Assumed Business  
Name and \$25.00 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 acknowledgment copy is (if other than # 4 above):

N. I. Accounting

P. O. Box 85

Spirit Lake, ID 83869

Phone number (optional):

(208) 623-6411

Signature: *Donald A. Baker*

(signature required)

Printed Name: Donald A. Baker

Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/12/2004 05:00  
CK: 3021 CT: 60207 BH: 770717  
1 @ 25.00 = 25.00 ASSUM NAME # 3

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