



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2006 AUG 21 AM 10:28

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Havenwood Caregiver Services

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

O'Keeffe Enterprises, LLC

5096 N Backwater Ave., Boise, Idaho 83714

(W39842)

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Theresa O'Keeffe

5096 N Backwater Ave.

Boise, ID 83714

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):

Phone number (optional):

Signature: Theresa O'Keeffe

Printed Name: Theresa O'Keeffe

Capacity/Title: Member

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\labn form\labn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
08/21/2006 05:00
CK: 7254 CT: 184341 RH: 971185
1 @ 25.00 = 25.00 ASSUM NAME # 2

D102966