

CERTIFICATE OF ASSUMED BUSINESS NAME

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:

Home Medical of Coeur d'Alene

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	Address
Home Medical of Coeur d'Alene	1010 Ironwood Dr. Ste B Coeur d'Alene ID 83814
David Westover	1010 Ironwood Dr. Ste B Coeur d'Alene ID 83814
Andrew Jeske	1010 Ironwood Dr. Ste B Coeur d'Alene ID 83814

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

Home Medical supply and Home Care Services (7 & 9)
See categories on the reverse

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

Home Medical of Coeur d'Alene
1010 Ironwood Dr. Ste B Coeur d'Alene ID 83814

Signed [Signature] 8-18-97
 By [Signature]
 Capacity General Partner

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Customer #

08/22/1997 09:00
CK: 65796720423 CT: 06156 DI: 32355

IDAHO SECRETARY OF STATE

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CK: 65796720423 CT: 06156 DI: 32355

1 @ 20.00 = 20.00 ASSUM NAME

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97 SEP -8 AM 9:23
SECRETARY OF STATE
STATE OF IDAHO