

FILED EFFECTIVE

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2008 AUG 28 AM 10: 05

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:

Valley West Rehabilitation Center

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

Name

Charolais Care III, Inc

Complete Address

110 North 800 East

(C 179876)

Jerome, Idaho 83338

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:

B. Roy Prescott

110 North 800 East

Jerome, Idaho 83338

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy (if other than # 4 above):

Secretary of State use only

Signature:

Printed Name: B. Roy Prescott

Capacity/Title: President

(see instruction # 8 on back of form)

Filing Date: 08/28/2008
File Number: 147236

IDAHO SECRETARY OF STATE
08/28/2008 05:00
CK: 147236 CT: 172099 BH: 1133557
1 @ 25.00 = 25.00 ASSUM NAME # 3

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