CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) OG OCT S! AM (O: 11 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 NameATE OF IDAHO The assumed business name which the undersigned use(s) in the transaction of business is: IDAHO CARING FOUNDATION FOR CHILDREN 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 THE UTAH AND IDAHO CARING 2890 EAST COTTONWOOD PARKWAY SALT LAKE CITY, UTAH, 84121 FOUNDATION, INC. 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 Minina 4. The name and address to which future Phone number (optional): 801.333.5285 correspondence should be addressed: KEVIN BISCHOFF Submit Certificate of REGENCE BCBSU Assumed Business 2890 EAST COTTONWOOD PARKWAY Name and \$20.00 fee to: SALT LAKE CITY, UTAH 84121 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 JO ANNE LONG 208 334-2301 THE REGENCE GROUP P.O. BOX 1271, MS-E12B Secretary of State use only PORTLAND, OR 97207 IDAHO SECRETARY OF STATE 11/07/2000 09:00 CK: 112792 CT: 88668 BH: 359489 Signature: 1 P 28.00 = 20.00 ASSUM NAME # 2 Printed Name: D40285 Capacity:

(see instruction # 8 on back of form)