



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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.

98 MAR 30 AM 9:39

STATE OF IDAHO

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

Blackfoot Home Health

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

Aspen Home Health

2315 Channing Way
Idaho Falls, Idaho 83404

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): 208 529 0800

Robert Collette

P.O. Box 3881

Idaho Falls, Idaho 83403

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

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: Robert Collette

Printed Name: Robert Collette

Capacity: PRESIDENT

(see instruction # 8 on back of form)

Secretary of State use only
IDAHO SECRETARY OF STATE

03/30/1998 09:00
CK: 1994 CT: 96514 BH: 95668

1 @ 20.00 = 20.00 ASSUM NAME

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Revision 1/98

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