227CERTIFICATE 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? PH '98 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: IN HOME CARE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: **Complete Address** Name Leadville Ave #/04 Kartu 30, Idaho 83706 Leriu 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Manufacturing Transportation and Public Utilities **Retail Trade** Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Services Construction Phone number (optional): 371-8741 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Name and address for this acknowledgment. **Basement West** PO Box 83720 CODV IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 then re Secretary of State use only IDAHO SECRETARY OF STATE 08/07/1998 09:00 CK: 2544 CT: 81461 BH: 135183 Signature: 1 0 20.00 = 20.00 ASSUN NAME Printed Name: Capacity: Vn I (see instruction # 8 on back of form)