



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

07 JUN -8 AM 10:02

SECRETARY OF STATE
STATE OF IDAHO

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

Vida Senior Referral Services

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

Name

Complete Address

Vida Senior Resources, Inc

8030 W. Emerald #185, Boise ID 83704

(2173517)

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Vida Senior Resources
8030 W. Emerald #185, Boise ID 83704

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

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

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

Phone number (optional):

Secretary of State use only

Signature: Glen Amador

(signature required)

Printed Name: Glen Amador

Capacity/Title: Director

(see instruction # 8 on back of form)

g:\cop\forms\abn\form\abn1.p65
Printed 04/22/03

IDAHO SECRETARY OF STATE
06/08/2007 05:00
CK: 14014 CT: 208737 BH: 1858742
1 @ 25.00 = 25.00 ASSUM NAME # 3

D112165