

## **CERTIFICATE OF** ASSUMED BUSINESS NAME 62 JAN 31 AR 8: 41

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

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

- Idano State Pi	erinatal Project
The true name(s) and <u>business</u> address(es) business under the assumed business name	
<u>Name</u>	Complete Address
St. Luke's Regional Medical Center, Ltd.	190 E. Bannock
(C 3925)	Boise, ID 83712
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:	der the assumed business name is:  and Public Utilities  Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West
Janine Sarti, Esq.  190 E. Bannock  Boise, ID 83712	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):  (208) 381-3595
	Secretary of State use only
nature: NW &W+7	IDAHO SECRETARY OF STATE  91/31/2002 05:8  CK: 3195 CT: 71254 BH: 4434  1 9 28.08 = 28.09 QSSIM MAN