



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2018 APR 19 AM 8:57

SECRETARY OF STATE
STATE OF IDAHO

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

Mountlake

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Caravan Health ACO 14 LLC 7509 NW Tiffany Springs Pkwy., Ste. 310, Kansas City, MO 64153

(Name) (Address)

(Name) (W201528) (Address)

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

Caravan Health, Inc. (CHACO 14) - Legal

(Name)

7509 NW Tiffany Springs Pkwy., Ste. 310

(Address)

Kansas City, MO 64153

(City)

(State)

(Zipcode)

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

n/a (#4)

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Anthony Gillette

Signature:

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/19/2018 05:00

CK:17528606 CT:172099 BH:1639162

10 25.00 = 25.00 ASSUM NAME #3

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