

## CERTIFICATE OF ASSUMED BUSINESS NAME

## **FILED EFFECTIVE**

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

2013 JUN 21 AM 9: 09

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

	STATE OF IDATIO
business is:	ne undersigned use(s) in the transaction of
Heritage Home Health and Hospice	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u>	ss(es) of the entity or individual(s) doing s name:  Complete Address
Heritage Home Health, LLC	1009 W. Quinn Rd. Suite B Pocatello, Idaho 83202
(W87712)	
	·
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es	Submit Certificate of
<ol> <li>The name and address to which future correspondence should be addressed: Heritage Home Health, LLC</li> </ol>	
1009 W. Quinn Rd. Suite B Pocatello, Idaho 83202	Boise ID 83720-0080 - 208 334-2301
<ol> <li>Name and address for this acknowledg copy is (if other than # 4 above).</li> <li>Danny Frasure</li> <li>2138 Rifleman Dr.</li> </ol>	ıment
Farmington, Utah 84025	Secondary of Otto
Signature:	Secretary of State use only
Printed Name: Danny Frasure	<del>-</del>
Capacity/Title: Managing Partner	<del>-</del>
Signature:	<del></del>
Printed Name:	CK: 1948 CT: 280488 RH: 1379144 1 0 25.00 = 25.00 ASSUM NAME # ;

D164043

Capacity/Title: