## **Trade Names**

Verified statements of person or co-partnership conducting a business under a trade name or assumed name. (Chapter 547 Code Of lowa)

Recorders Information

FILED NO. 2899

BOOK #/ PAGE #/

547, Code Of Iowa)	l	93 MAY 17 PH 3: 3	
STATE OF IOWA, Madison County, ss:  I (we) Board of Trustees, Madison County  Memorial Hospital (Robert M. Young, Administrator)			
		MICHELLE UTSLES RECORDER	
		MADISON COUNTY, IOW	
n compliance with the provisions of Chapter 547, C			
		•	
usiness conducted, or to be conducted, under th	ne trade name of <u>Ine Bi</u>	ridge Chemical	
Dependency Center	the t	ousiness address of which is	
300 Hutchings	Street. Winters	set lowa	
above named county, is owned by the following			
Names of Persons Owning or Having Any Interest in the Business	P.O. Address	Residence Address	
Madison County Memorial Hospital	300 Hutchings		
(County hospital organized under	1 /	i i	
Chapter 347 of the Code of Iowa)	1 '		
<u> </u>			
and we hereby establish or amend as follows:		REC \$ 1 Articl	
X Establish Trade name <u>The Bridge Cher</u>	mical Dependency Cond	AUD \$	
	•		
<del>_</del>	Date COMPUTER V		
Dissolve		<del></del>	
Original file or document #			
Withdrawal of name(s) of Partner(s)			
Original file #		Date	
Add name(s) of Partner(s)			
		· • ·	
Original file #		Date	
Change of addressBusiness	Home		
And that there is no one except those mentioned above named business.	d in the foregoing list who o	wns or has any interest in the	
<u>We</u> further certify that a corrected on any change in ownership, as provided by Sec	statement will be filed in the	ne future each time there may	
· · · · · · · · · · · · · · · · · · ·		•	
Signed this 12 day of MAY	, 19_	, 19 <u>93</u>	
<b>b</b>			
XI <del>TRAN-1-</del> /I			
JOHN THE THE PARTY OF THE PARTY		<del></del>	
	· ·		
Subscribed in my presence and sworn to before	me by the said Afrai	e Tabert M.	
•			
Young his 12th day of May	CC /		
//- <b>/</b>		3,73°····	

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MISC. RECORD 41

1. N. ...