

FILED EFFECTIVE

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO 2004 MAY -3 AM 9:19  
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

Behavior Strategies

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

Name	Address
Kelly I. Bow	824 MICHIGAN ST GOODING, ID 83330

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

Psychosocial Rehabilitation Provider  
See categories on the reverse

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

Behavior Strategies  
824 MICHIGAN ST  
GOODING, ID 83330

Signed Kelly I Bow  
By self  
Capacity Sole Proprietor

Submit Certificate of Assumed Business Name and \$20.00 fee to:  
25.00

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

Revision 10/99

0 kcorpformslabn.pmb

IDAHO SECRETARY OF STATE  
05/03/2004 05:00  
CK: 6149 CT: 158810 BH: 742891  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D75950