LIV CERTIFICATE OF ASSUMED BUSINESS NAME Jan 21 10 49 M 197 To the SECRETARY OF STATE, STATE OF IDAHO 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: STRATEGIC MEASURES 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 KATHLEEN M. GIEL 1115 N. 23 20 ST BOISE 1D 83702 3. The general type of business transacted under the assumed business name is: SERVICES See categories on the reverse 4. The name and address to which correspondence should be addressed: KATHLEEN M. GIEL: 1115 N 23eD ST; BOISE ID 83702 Kathleen Signed __ KATHLEEN M. GIEL Bv Capacity SOLE PROPRIETOR Submit Certificate of Assumed Customer # Business Name and \$20.00 fee to: Secretary of State use only Secretary of State Š 700 West Jefferson IDAHO SECRETARY OF STATE Revision 0000 7001/15/10 3TAG PO Box 83720 56731 5 Boise ID 83720-0080 CK 4: 2677 CUST# 75148 <u>bm</u>d ASSUM NAME corp/forms/abn 主權 20.00= 20.00 D