

Capacity/Title:

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

11 AUG 31 AM \$52

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

Instructions are included on back of application. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Nini & Timmy Nails & Spa 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Pullman Nhi Yen Hoang 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Manufacturing Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 Boise ID 83720-0080 232 Baker St #10 208 334-2301 MOSCOW, TD 83843 5. Name and address for this acknowledgment -CODY IS (if other than # 4 above): Secretary of State use only Capacity/Title: Sole Proprieter Signature: \_\_\_\_ Printed Name:

IDAHO SECRETARY OF STATE 08/31/2011 05:00 CK: 1040801759 CT: 262021 BH: 1288588

25.00 ASSUM NAME # 2