

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

## FILED EFFECTIVE

10 APR -2 AM 9: 11

SECRETARY OF STATE STATE OF IDAHO

D138198

business is: Avon Bea	uty Center		· · · · · · · · · · · · · · · · · · ·
The true name(s) and business address(es) business under the assumed business nam     Name     Karen R. Petersen	ie:	ntity or individual(s) doing  Complete Address  Woodruff Ave, Idaho Falls, ID 8340	n see e
David A. Petersen	370 S Woodruff Ave, Idaho Falls, ID 83401		)1
3. The general type of business transacted un  Retail Trade Transportation  Wholesale Trade Construction			
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  Avon Beauty Center		Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
370 S Woodruff Ave		(208) 334-2301	
5. Name and address for this acknowledgme copy is (if other than #4 above).	ent		
		Secretary of State use only	·
gnature: Harand tesas	formstabn.p86 2003	engaly engaly to work	*
rinted Name: Karen R. Petersen  apacity/Title: Owner	g/corpitorms/abn forms/abn.p66 Revised 04/2003	94/92/2916 0x: 1268 CT: 246655	OF STATE 05 = 00 BH: 1215859 ASSUM NAME 1