

FILED EFFECTIVE



# 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.

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

MAGIC MIRROR BEAUTY SALON

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

Name

Complete Address

HELEN FAYE HARPER

1013 CLEVELAND BLVD.

BLAINE, ID. 83601

CALDWELL, ID.

83605

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

MAGIC MIRROR BEAUTY SALON

1013 CLEVELAND BLVD.

CALDWELL, ID. 83605

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

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-454-0672

Signature: HeLEN FAYE HARPER  
(Signature required)

Printed Name: HELEN FAYE HARPER

Capacity/Title: OWNER

(see instruction # 8 on back of form)

91certformdash10402003  
Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE  
06/01/2005 05:00  
CK: 7779 CT: 158010 BH: 813574  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 88346