



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

**FILED EFFECTIVE**

2016 MAY -2 PM 2: 15

SECRETARY OF STATE  
STATE OF IDAHO

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

Hair Bliss

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Shannon Swint

6407 W Ustick Rd, Boise ID 83704

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☒ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☐ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Shannon Swint

(Name)

6407 W Ustick Rd

(Address)

Boise

(City)

ID

(State)

83704

(Zipcode)

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

Shannon Swint

(Name)

671 STennyson Way

(Address)

Boise

(City)

ID

(State)

83709

(Zipcode)

Printed Name: Shannon Swint

Signature:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

05/02/2016 05:00

CK:104 CT:197662 BH:1526542

1@ 25.00 = 25.00 ASSUM NAME #2

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