



# 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.**

RECEIVED EFFECTIVE  
JAN 16 12 25 PM '02

SECRETARY OF STATE

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

DABANKA INT. BEAUTY SUPPLY

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
<u>Juliane <del>Wesker</del></u>	<u>10350 JAY ROAD</u>
<u>Dabanka</u>	<u>BOISE, ID 83703</u>

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade          | <input type="checkbox"/> Construction                        |
| <input checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input checked="" 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:

10350 JAY ROAD  
BOISE, ID 83703

Submit Certificate of  
Assumed Business  
Name and \$20.00 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):

② \_\_\_\_\_

Signature: Juliane K. Dabanka

Printed Name: JULIANE DABANKA

Capacity: \_\_\_\_\_

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE  
01/16/2002 05:00  
CK: CASH CT: 122659 BH: 440537  
1 @ 20.00 = 20.00 ASSUM NAME # 2

DS1193