

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2017 FEB 21 AM 10:54

SECRETARY OF STATE
STATE OF IDAHO

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

ELEGANTE' SALON

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):

LAURIE A. SCOTT 921 E. GILBERT AVE COEUR D'ALENE ID.
(Name) (Address) 83815

MICHAEL H. SCOTT 921 E. GILBERT AVE COEUR D'ALENE ID 83815
(Name) (Address)

(Name)

(Address)

(Name)

(Address)

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

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

4. Mailing address for future correspondence:

LAURIE A. SCOTT
(Name)
921 E. GILBERT AVE
(Address)
COEUR D'ALENE ID 83815
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: LAURIE A. SCOTT

Signature: [Signature]

Printed Name: Michael H. Scott

Signature: Michael H. Scott

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/21/2017 05:00

CK:714 CT:158010 BH:1569881

10 25.00 = 25.00 ASSUM NAME #2

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