

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

Signature:

2016 SEP - 1 AM 9: 46

SECRETARY AS

| 1 | The assumed business name which the undersigned use(s) in the transaction of business is: PRIME BEAUTY | | | | | |
|---------------|---|---|----|--|---|--|
| •• | | | | | | |
| 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): | | | | | |
| | Cindy E Ingalls | 3835 W Furcula Dr Coeur d'Alene, ID 83815 | | | | |
| | (Name) | (Address) | | | | |
| | (Name) | (Address) | | | | |
| | (Name) | (Address) | | | | |
| | (Name) | (Address) | | | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> |
| 3. | The general type of business transacted under the assumed business name is: | | | | | |
| | Retail Trade Wholesale Trade | Construction Agriculture | | ☐ Trans | portation and Public Utilit | ies |
| | ★ Services | Manufacturing | g | | ce, Insurance, and Real E | ∃state |
| 4. | Mailing address for future | correspondence: | 5. | Name and a copy is (if othe | ddress for this acknowled | lgment |
| | Cindy E Ingalls | | | 7. | | |
| | (Name) 3835 W Furcula Dr | | | (Name) | | |
| | (Address) Coeur d'Alene, ID 83815 | | | (Address) | | |
| | (City) | (State) (Zipcode) | | (City) | (State) | (Zipcode) |
| | inted Name: Cindy E Ingal | <u> s</u> | | Secretary of State use only | | |
| Si | gnature: What E. 2 | malls | | | | |
| Printed Name: | | | | | 10AHO SECRETARY OF STAT 09/01/2016 05:00 | - |
| Signature: | | | | CK:805749 CT:158010 BH:1544453 16 25.00 = 25.00 ASSUM NAME #2 | | |
| | inted Name: | | | D188921 | | |

Rev. 08/2015