



# 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.**

**FILED EFFECTIVE**

03 OCT -8 PM 3:55

SECRETARY OF STATE  
STATE OF IDAHO

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

Show Your Style

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

Name

Nancy Carriere  
Karen Mitchell

Complete Address

233 P.O. Box 873, Eagle 83616  
P.O. Box 873, Eagle 83616

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:

Show Your Style  
P.O. Box 873  
Eagle, ID 83616

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Phone number (optional):

208-939-9842

Secretary of State use only

Signature: Nancy L. Carriere  
(signature required)

Printed Name: Nancy L. Carriere

Capacity/Title: Partner

(see instruction # 8 on back of form)

g:\corp\forms\abn forms\abn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
10/08/2003 05:00  
CK: 1192 CT: 158010 BH: 705638  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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