

Signature:\_

## **CERTIFICATE OF** ASSUMED BUSINESS NAME FILED EFFECTIVE



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

Filing fee: \$25.00.

2017 OCT 31 AM 8-38

The assumed business name which	ch the undersigned	SECRETARY OF STATE I use(s) in the transparent of business	s is:
XOXO Lash Stud	iiO	W-15-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
2. The individual and/or entity names the assumed business name (do received in the control of t	not include the name you RO Box F	Iress(es) of those doing business undoubleted in #1):  18 Pellenue, ID 83313	jer
(Name) (Addre	288)		
(Name) (Addri	968)		
(Name) (Addre	ess)		
Wholesale Trade Services  Mailing address for future correspondent  Walk R. Schere V	Agriculture Manufacturing ondence: 5.	Mining Finance, Insurance, and Real Real Real Real Real Real Real Real	
(Name) POBOX 718 (Address) Rellevue (State)	53313 (Zipcode)	(Address) (City) (State)	(Zipcode)
Printed Name: <u>KANY R.Sche</u>	rer [	Secretary of State use only	
Signature: <u>kel</u> & <u>R Sche</u> Printed Name: Signature:	<u> </u>	IDAHO SECRETARY OF STA 10/31/2017 05:0 CK:1012 CT:158010 BH:1 10 25:00 = 25:00 ASSUM	30 .609911
Printed Name:	-		
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