CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED/EFFECTIVE
02 APR 12 AM 9:32
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

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

   A Touch of Elegance

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
Denise Nicholson	95 North Cimarron Ct.
	Nampa, Id 83651

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

- [ ] Retail Trade
- [ ] Wholesale Trade
- [x] Services
- [ ] Manufacturing
- [ ] Finance, Insurance, and Real Estate
- [ ] Transportation and Public Utilities
- [ ] Construction
- [ ] Agriculture
- [ ] Mining

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

4. The name and address to which future correspondence should be addressed:

   Denise Nicholson
   95 North Cimarron Ct.
   Nampa, Id 83651

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

Phone number (optional):

Signature: Denise Nicholson

Printed Name: Denise Nicholson

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 01/2001

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/12/2002 05:00
CK: 2908 CT: 158010 BH: 458776
1 @ 20.00 = 20.00 ASSUM NAME # 2