



**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.
Instructions are included on back of application.

FILED EFFECTIVE

11 SEP 19 AM 9:22

SECRETARY OF STATE
STATE OF IDAHO

ess is:
Allure Salon and Spa

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

Name Family & Patrica Olsen

Complete Address
940 E Lincoln Rd.
Idaho Falls, ID 83401

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

Retail Trade Transportation
 Wholesale Trade Construction
 Services Agriculture
 Manufacturing Mining
 Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

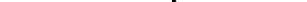
4. The name and address to which future correspondence should be addressed:

correspondence should be addressed:
Larry & Patricia Olson
940 E. Lincoln Rd.
Idaho Falls, ID 83401

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Secretary of State use only

Signature: 

Printed Name: John Doe

Capacity/Title: Owner

Signature: Patricia Olsen

Printed Name: Patricia J. Sch

Capacity/Title: Chairman

IDaho SECRETARY OF STATE
09/19/2011 05:00
CK: 8391 CT: 262558 DH: 1298928
1 @ 25.00 = 25.00 ASSUM NAME # 2

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