



FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 AUG 26 AM 9:06

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:

Evans Hairstyling College

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

Rick O. Evans

P.O. Box 272, Macks Inn Idaho 83433

April C. Evans

SAME

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☒ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

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

Evans Hairstyling College

P.O. Box 877

Rexburg, Idaho 83440

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

Evans Hairstyling College

P.O. Box 272

Macks Inn, Idaho 83433

Phone number (optional):

208 558 9658

Secretary of State use only

Signature: *Rick O. Evans*

(signature required)

Printed Name: _____

Rick O. Evans

Capacity/Title: _____

Co Owner

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
08/26/2004 05:00
CK: 3164 CT: 158810 BH: 762933
1 @ 25.00 = 25.00 ASSUM NAME # 2

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