



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

02 FEB 25 AM 9:30

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: ANGIE'S CLASSIC HAIR

SALON & PRODUCTS

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

Name

ANGELA L. CHRISWELL

RON E. CHRISWELL

Complete Address

3505 SOMERSET DR. PLATEAU ID 83201

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

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

ANGELA L. CHRISWELL

3505 SOMERSET DR.

PLATEAU ID. 83201

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

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

Phone number (optional):

Secretary of State use only

Signature: Angela L. Chriswell

Printed Name: ANGELA L. CHRISWELL

Capacity: OWNER

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE
02/25/2002 05:00
CK: 7000 CT: 157709 BH: 440235
1 @ 20.00 = 20.00 ASSUM NAME # 2

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