

CERTIFICATE OF ASSUMED BUSINESS NAME

Please type or print legibly. Instructions are included on back of application.

	En.
CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	SNAME SCORE AM 9:
Please type or print legibly. Instructions are included on back of application.	
The assumed business name which the und business is:	dersigned use(s) in the transaction of
In Touch Salon	
 The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> Sharon Bennett 	• • • • • • • • • • • • • • • • • • • •
Charles Bornes	4227 44 High Meadow Drive Boise to 657 14
Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ☐ Sharon Bennett ☐ 4227 W High Meadow Drive Boise Id 83714	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above).	nt
Showton Romant	Secretary of State use only
gnature Water Sharon Bennett	
inted Name: Sharon Bennett apacity/Title: Owner	
gnature:	IDAHO SECRETARY OF STATE
nted Name:	05/10/2013 05: CK: 2361449 CT: 179713 BH: 1 0 25.80 = 25.00 ASSUM N

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Printed Name: Capacity/Title:_