



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 AUG 19 AM 8:55

SECRETARY OF STATE  
STATE OF IDAHO

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

A Brush with Style Nail Salon

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Sarah Lynn Boe 2062 Main Street, Suite #1. Coeur d'Alene ID 83814  
(Name) (Address) (City) (State) (Zipcode)

Shaylin Nikole Bailey 2062 Main Street, Suite #1 Coeur d'Alene ID 83814  
(Name) (Address) (City) (State) (Zipcode)

(Name) (Address) (City) (State) (Zipcode)

(Name) (Address) (City) (State) (Zipcode)

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

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction  | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade         | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Services     | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Sarah Lynn Boe

(Name)

2023 N. 7th Street

(Address)

Coeur d'Alene

(City)

Idaho

(State)

83814

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Sarah Lynn Boe

Signature: Sarah Lynn Boe

Printed Name: Shaylin Nikole Bailey

Signature: Shaylin Nikole Bailey

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/19/2015 05:00

CK:1002 CT:313641 BH:1488747

1@ 25.00 = 25.00 ASSUM NAME #2

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