

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 JUN 30 AM 9: 25

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business r Hidden Beauty Salon	name which the undersig	ned —–	use(s) in the	transaction of business	
2.		tity names and business and business and business and business			ose doing business und	er
	Erica Bonifas	535 Pine St. Ste 7	Potla	atch ID 8385	5	
	(Name)	(Address)				
	(Name)	(Address)				 _
	(Name)	(Address)		,		
	(Name)	(Address)				
 3. 4. 		ness transacted under the Construction Agriculture Manufacturing	J	☐ Trans ☐ Minis	sportation and Public Ut	ıl Estate
7.	Erica Bonifas (Name) PO Box 72			COPY is (if oth (Name)		
	(Address)			(Address)		
	Potlatch (City)	ID 83855 (State) (Zipcode)		(City)	(State)	(Zipcode)
Printed Name: Erica Bonifas				Secretary of State use only		
Sig	gnature:	Violacy				
Printed Name:					10410 SECRETARY OF ST 96/30/2017 05:	
Signature:				CE:1900004562 CT:341979 BH:1591481 16 25.00 = 25.00 ASSUM NAME #2		
Printed Name:				N195523		

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