

Capacity/Title:\_

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2912 HAR 12 AM 9: 46

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

SECRETARY OF STATE STATE OF IDAHO

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1. The assumed business name which the unders business is:	igned use(s) in the transaction of and Naif Salon
Such a Co. Tall	una ray suion
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Name  3	Complete Address
3. The general type of business transacted under  Retail Trade Transportation and Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  13350 Daven port Construction  Saland  Saland	
5. Name and address for this acknowledgment copy is (if other than # 4 above).	
Signature: hant tocher	Secretary of State use only
Printed Name: Drang L. KLIELIN	;
Capacity/Title: <u>Swher</u>	IDAHO SECRETARY OF STATE
Signature:	03/13/2012 05:00 CK: 1152 CT: 268186 BH: 1314986 1 8 25.88 = 25.88 ASSUM NAME # 2
Printed Name:	D 153981
Connecte / Title	