CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on revers To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name of IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: he Hair Affair TIL 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address 3. The general type of business transacted under the assumed business name is: (mark only those that apply) **Retail Trade** Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina 4. The name and address to which future Phone number (optional): 20X-92L-0937 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY is (if other than #4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 STREET SECRETURY SPISTIFE 05/07/1998 09:00 UK: 6720 CT: 98359 BH: 108483 Signature: 1 @ 20.00 = 20.00 ASSUM MAME **Printed Name** Capacity: (see instruction # 8 on back of form)