



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.
NOTE: See instructions on reverse before filing.

FILED/EFFECTIVE

2002 MAR 27 PM 2:45

SECRETARY OF STATE
STATE OF IDAHO

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

The Scented Room

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name
Sondra Hawkins

Complete Address
756 Meaghan Pl
Boise 83712

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

Retail Trade Transportation and Public Utilities
 Wholesale Trade Construction
 Services Agriculture
 Manufacturing Mining
 Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

Sondra Hawkins
756 Meaghan Pl
Boise 83712

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

Signature:

Printed Name: Sondra Hawkins

Capacity/Title: Owner

(see instruction # 8 on back of form)

Phone number (optional): _____

Secretary of State use only

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Revised 1/22/2001

IDAHO SECRETARY OF STATE
03/27/2002 05:00
CK: 5486 CT: 158810 BH: 455899
1 @ 20.00 = 20.00 ASSUM NAME # 2

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