

Capacity/Title:\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

## **FILED EFFECTIVE**

11 JUN 27 AM 9:45

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

	The assumed business name which the unbusiness is:  Fete S	Style Bar
	The true name(s) and <u>business</u> address(est business under the assumed business name Name  SIREN SALON LLC  (WAGGUH)	
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed:  2361 Table Rock Rd	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt
Capa	city/Title: Ouner / Menthes LLC	Secretary of State use only
Signature:Printed Name:		1DANO SECRETARY OF STATE  06/27/2011 05:00  CK: 1047 CT: 260187 BH: 1280258  1 8 25.00 = 25.00 ASSUM NAME N 2