CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF ID Pursuant to Section 53-504, Idaho Code adoption of an Assumed Business Name.	, the undersigned gives house or STATE STATE OF IDAHO
2. The true name(s) and business address(es) business under the assumed business name Name Linica Name	of the entity or individual(s) doing e is/are: Address HIS Logan B. Tdaho Falls
3. The general type of business transacted unc	der the assumed business name is:
4. The name and address to which correspondence should be addressed: Cuts Plus His Logan Dr. Idaho Falls Id., 83401	
Signed By Capacity_	Denise Nelson Dunise Nelson
Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Customer # 13449-State and SPANE and SPANE and SPANE AND ASSUMMANE D 5883