



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

2013 APR 23 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

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

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

Hair and Face Salon

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

Name

Complete Address

Phil Lee

205 E 3rd St. Moscow, ID 83843

LeAnn Lee

205 E 3rd St. Moscow, ID 83843

Hair Designers ~~LLC~~ 205 E. 3rd St. Moscow

C132033

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Phil Lee

205 E 3rd St.

Moscow, ID 83843

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

Signature:

Printed Name: Phil Lee

Capacity/Title: Owner

Signature:

Printed Name: Phil Lee

Capacity/Title: Owner/Employee

Submit Certificate of
Assumed Business
Name and to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE
04/23/2013 05:00
CK: 4311 CT: 202201 BH: 1370734
1 @ 25.00 = 25.00 ASSUM NAME # 2

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