



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.

2005 JUN 27 10:00:33

FILED EFFECTIVE

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

Tracie's Hair

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

Kari Williams

5159 Leesburg Chubbuck Id.

Tracie Babbitt

389 Randolph Bozello Id.

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:

Kari Williams
5159 Leesburg
Chubbuck Id. 83202

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

221-1824

Secretary of State use only

Signature:

Kari Williams

Printed Name:

Kari Williams

Capacity/Title:

Owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
06/27/2005 05:00
CK: 26011 CT: 150010 BH: 810346
1 @ 25.00 = 25.00 ASSUM NAME # 2

D89174