(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah	
gives notice of adoption of an As 1. The assumed business name which the undoposition business is: The Hair Department of the property of th	dersigned use(s) in the transaction of
2. The true name(s) and business address(es business under the assumed business name Name Name Name Name) of the entity or individual(s) doing
3. The general type of business transacted un (mark only those that apply)	
	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining hone number (optional):
correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Monedale 20 8 3628	Secretary of State use only IDANO SECRETARY OF STATE 03/17/2000 09:00
Signature: Chr. Baherre	E 03/17/2080 09:00 CK: 1484 CT: 128374 BH: 388842
Printed Name: Chris Bahem	1 9 20.00 = 20.00 ASSUM WANE # 2
Capacity: <u>OWNEY</u>	D 34159