| 27  |  |
|---|--|
| CERTIFICATE OF  | FREDELIFECTIVE   |
| ASSUMED BUSINESS NAME   |  |
| Durquent to Section 53-504, Idaho Code, the undersigned   |  |
| submits for filing a certificate of Assumed Business Name   | 02 MAY 28 PH 2: 50   |
| <u>Please type or print legibly.</u><br>NOTE: See instructions on reverse before filing.  | STATE OF IDAHO   |
|   |  |
| 1. The assumed business name which the undersigned use(s) in the transaction of   |  |
| business is:<br>Al Women Hair Replacement Clinic  |  |
| all Women Hair Kepla  | acement alman  |
|   | ty or individual(s) doing  |
| <ol> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing<br/>business under the assumed business name:</li> </ol> |  |
| Name 4  | Complete Address   |
| Rotter In Imol 2004   | S. Zaglism Rd. Dorse, A.83/03  |
| pung no   | 0  |
|   |  |
|   | numed business name is:  |
| 3. The general type of business transacted under the as   | sumed business name io.  |
| Retail Trade Transportation and Publ  | ic Utilities   |
| Wholesale Trade Construction  |  |
| Services Agriculture  | Submit Certificate of  |
| Manufacturing Mining  | Assumed Business<br>Name and <b>\$20.00</b> fee to:  |
| Finance, Insurance, and Real Estate   | Name and \$20.00 ree to.   |
| 4. The name and address to which future   | Secretary of State   |
| correspondence should be addressed:   | 700 West Jefferson<br>Basement West  |
| RHICANT   | PO Box 83720   |
| 2 Dely W Printer PT   | Boise ID 83720-0080  |
| 2004S. Eaglisonna   | 208 334-2301   |
| Souse, Id. 83/05  | Dhana numbor (ontional)'   |
| 5. Name and address for this acknowledgment   | Phone number (optional):   |
| COPY IS (if other than # 4 above):  |  |
|   |  |
|   | Secretary of State use only  |
|   |  |
| Signature:<br>Printed Name:<br>Capacity/Title:  |  |
| Signature: Struct Printed Name: BETTY D. Wilmat   | IDAHO SECRETARY OF STATE   |
| Printed Name: <u>BETTY</u> <u>NIMA</u>  | 05/28/2022 BH: 468309<br>CK: 3747 CT: 158010 BH: 468309<br>CK: 3747 CT: 28.98 ASSUM NAME # 2 |
|   | 1 5 CO. 66 - Co. 60 Mars   |
| (see instruction # 8 on back of form)   | D55306   |
|   | $\sim$   |