



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2006 MAY - 1 AM 9:24

SECRETARY OF STATE
STATE OF IDAHO

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.

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

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

Elizabeth Shappart427 N. Main, Suite GPocatello, Idaho83204

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:

Elizabeth Shappart
427 N. Main, Suite G
Pocatello, Idaho 83204

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

Elizabeth Shappart
RR 2 Box 177K
Pocatello, ID 83202

Signature: Elizabeth Shappart
(signature required)

Printed Name: Elizabeth Shappart

Capacity/Title: Owner

(see instruction # 8 on back of form)

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

Phone number (optional):

Secretary of State use only

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IDaho SECRETARY OF STATE
 05/01/2006 05:00
 CK: 39284 CT: 158810 RH: 952273
 1 @ 25.00 = 25.00 ASSUM NAME # 2