

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2006 SEP -5 AM 9: 30

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Head 2 Too	e Studio
2. The true name(s) and business address(es) or business under the assumed business name: Name Sandra L. McLean	
3. The general type of business transacted under	
 ✓ Retail Trade	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): (208) 783-2314
	Secretary of State use only
gnature: <u>Sandra L. McLean</u> (signature required) inted Name: Sandra L. McLean	DAHO SECRETARY OF STATE
apacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 09/05/2006 05 = 0 CK: 1497 CT: 85139 BH: 9733 1 @ 25.00 = 25.00 ASSUM NAM