

## **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 5 10 AM 9: 15

Please type or print legibly.

NOTE: See instructions on reverse before filing. SECRETARY OF STATE

	STATE OF IDAHO
<ol> <li>The assumed business name which the un business is:</li> </ol>	ndersigned use(s) in the transaction of
Surenity Salon and	Spn town mess
2. The true name(s) and business address(e business under the assumed business name  Name  Ttrra Hansen	Complete Address  2044Z Main St. Corry 19544 Hwy 20 Carry, Td. 8332C.
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Strungty Sulanand spn Willer 19544 Hugzo Cavy	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West
5. Name and address for this acknowledgme copy is (if other than #4 above).  Terro. Hansen 19544 Hung 20 Cany, 93220, J	208) 823-4446 Eduh 0 Secretary of State use only
ignature: Julia Hawn (signature required) rinted Name: Tuva Honsun apacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  ### ### ### ### ### ### ### ### ######

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