

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

(see instruction # 8 on back of form)

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SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the und business is:	ersigned use(s) in the transaction of
Kellis Extreme Gro	ooming & Day Spa
The true name(s) and business address(es) business under the assumed business name Name Kelly Shreves Kelli Shaffer	of the entity or individual(s) doing e: Complete Address 9740 W Fairview Ave Boise 83704 9740 W Fairview Ave Boise 83704
3. The general type of business transacted un Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature: Kelly Shi Live (signature required) Printed Name: Kelly Shreves Capacity/Title: WineR	Secretary of State use only 1