

227



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.

FILED EFFECTIVE

2004 AUG 11 A 8:28

SECRETARY OF STATE
STATE OF IDAHO

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

Royal Touch Skin Renewal

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 A. Nettleton 18542 Wilson Rd.; Glenns Ferry, Id. P3623

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 | |
- Submit
 Assume
 Name a

- 4. The name and address to which future correspondence should be addressed:**

Elizabeth A. Nettleton
18542 Wilson Rd.
Glenns Ferry, ID 83623

**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)366-7364

Secretary of State use only

Signature: Elizabeth A. Nettleton
(Signature required)

Printed Name: Elizabeth A. Nettles

Capacity/Title: Owner

(see instruction # 8 on back of form)

[illegible]

1079054

IDWD SECRETARY OF STATE
08/11/2004 05:00
CK: 045 CT: 181009 BH: 760229
1 @ 25.00 = 25.00 ASSUM NAME # 2