

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.

business is: J Miller Salon		<u> </u>	
The true name(s) and business address(es) business under the assumed business name			
Name		Complete Address	
Jennifer Miller	Jennifer Miller 280		
Darren J. Miller 280		0 E Kathleen Suite 1 CDA, ID 83814	
The general type of business transacted und Retail Trade Transportation a			
 Wholesale Trade ✓ Services ✓ Manufacturing ✓ Mining ✓ Finance, Insurance, and Real Estate 		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson Basement West	
Jennifer or Darren Miller		PO Box 83720 Boise ID 83720-0080	
PO Box 1912 Hayden, ID 83835		208 334-2301	
. Name and address for this acknowledgmen	t	Phone number (optional):	
COPY is (if other than # 4 above).		(208) 755-2528	
		Secretary of State use only	
ed Name:	g'voorpiformslebn formslebn.p65 Revised 04/2003		
acity/Title: Owner	g Ycorp	IDAHO SECRETARY OF S 10/15/2004 0	
(see instruction # 8 on back of form)		CK: 3591 CT: 158010 B 1 @ 25.00 = 25.00 ASS	