



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

DEC 31 2 22 PM '01

SEC. STATE

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

Hair by Cassie

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>Cassie M. Beltz</u>	<u>224 15th Ave. So., Nampa, ID 83651</u>
_____	_____
_____	_____

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 | |

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

Cassie M. Beltz
224 15th Ave. So.
Nampa, ID 83651

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:

Cassie M. Beltz

Printed Name: Cassie M. Beltz

Capacity/Title: Owner

(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and **\$20.00** fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

Phone number (optional): _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
12/31/2001 05:00
 CK: 2141 CT: 155160 BH: 437396
 1 @ 20.00 = 20.00 ASSUM NAME # 2

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