



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.

2015 AUG 20 AM 8:29

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

Este Skin Care & Lashes

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

Name

Erin Tower

Complete Address

419 E. ELBRIDGE ST
MERIDIAN, ID 83646

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:

Erin Tower

419 E. ELBRIDGE ST

MERIDIAN, ID 83646

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Signature: Erin

Printed Name: Erin Tower

Capacity/Title: Owner | Esthetician

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDaho SECRETARY OF STATE

08/20/2015 05:00

CK:1288 CT:313683 BH:1488965
1@ 25.00 = 25.00 ASSUM NAME #2

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