



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

99 SEP 7 AM 10:56
STATE OF IDAHO
FILED

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

Impact Hair Designs

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

Name	Complete Address
<u>Pamela K. Hunt</u>	<u>11645 S. Robert St., Boise, ID 83705</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

Pamela K. Hunt
11645 S. Robert St.
Boise, ID 83705

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

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

Signature: Pamela K. Hunt
 Printed Name: Pamela K. Hunt
 Capacity: President

(see instruction # 8 on back of form)

Revision 1/98 g:\corp\forms\abn.p65

Secretary of State use only

IDAHO SECRETARY OF STATE

09/07/1999 09:00
CK: 2175 CT: 120166 BH: 247774

1 @ 20.00 = 20.00 ASSUM NAME # 2

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