

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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.

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

Just Friends Nail Salon

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

Anna Decker

Complete Address

692 W. Wilbur #111 CDA 83815

Tawnia Richards

4510 E. 116th #4 Post Falls, 83854

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

☐ Retail Trade

☐ Manufacturing

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Finance, Insurance, and Real Estate

☒ Services

☐ Construction

☐ Mining

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

Just Friends Nail Salon

206 Indiana Suite #116

Coeur d'Alene, ID 83814

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: Anna Decker / Tawnia Richards

Printed Name: Anna Decker / Tawnia Richards

Capacity: Partners

(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

Secretary of State use only

IDAHO SECRETARY OF STATE

02/01/1999 09:00  
CX: 7212196908 CT: 110493 BH: 183937

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 2/87

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