



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned 2004 JAN 26 AM 9:54  
submits for filing a certificate of Assumed Business Name.

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

STATE  
STATE OF IDAHO

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

Hair ! Nails Etc.

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

Name

Julie Durbin

Complete Address

123 BrookLane N.

Twin Falls Id 83301

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:

1342 Addison Ave E  
Twin Falls Id  
83301

Submit Certificate of  
Assumed Business  
Name and \$25.00 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):

Phone number (optional):

734-10465

Signature: Julie Durbin  
(signature required)

Printed Name: Julie Durbin

Capacity/Title: Owner /operator  
(see instruction # 8 on back of form)

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 Revised 04/2003

Secretary of State use only

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IDaho SECRETARY OF STATE  
01/27/2004 05:00  
 CK: 9052713 CT: 158810 BH: 723697  
 1 @ 25.00 = 25.00 ASSUM NAME # 2