

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.

2007 JUL 18 AM 8: 19

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the un business is:	SIAIE OF ndersigned use(s) in the transaction of
- Overbaulin Hair	Salow
2. The true name(s) and business address(es business under the assumed business name Name Lisa Cummings	s) of the entity or individual(s) doing ne: Complete Address SIG 17th Aul S Numple TD 83651
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Lisa Cummunes	Secretary of State 700 West Jefferson Basement West PO Box 83720
Nampa ID 83651	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional): (208) 703-6779
	Secretary of State use only
Signature: Lie (signature required)	formelation p65
Printed Name: Lisa Cummungs	Pervised Of
Capacity/Title: Dusner	75000

IDAHO SECRETARY OF STATE

07/18/2007 05:00

CK: 5681195905 CT: 158018 BH: 1866091
1 2 25.00 = 25.00 ASSUM NAME # 2

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