

2014 NOV 20 AM 9:49

SECRETARY OF STATE
STATE OF IDAHO



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

Instructions are included on back of application.

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

Beauty By Kessa

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

<u>Name</u>	<u>Complete Address</u>
<u>Kessa</u>	<u>347 main AVE. E</u>
<u>Irene</u>	<u>Twin Falls, ID 83301</u>
<u>Wonenberg</u>	

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" 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:

Kessa Wonenberg
743 2nd Ave E.
Twin Falls, ID 83301

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

Signature: K Wonenberg

Printed Name: Kessa Wonenberg

Capacity/Title: cosmetologist

Signature: _____

Printed Name: _____

Capacity/Title: _____

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

Secretary of State use only

IDAHO SECRETARY OF STATE

11/20/2014 05:00

CK:201 CT:303387 BH:1450041

1@ 25.00 = 25.00 ASSUM NAME #2

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