

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.

2013 MAR -5 PM 1: 02

SECRETARY OF STATE STATE OF IDAHO

	STATE OF IDAHO
1. The assumed business name which the u	ndersigned use(s) in the transaction of
business is:	
S.O.S SHAMPOOING	
The true name(s) and <u>business</u> address(e business under the assumed business na Name	• • • • • • • • • • • • • • • • • • • •
	8051 E CASPIAN DR NAMPA ID 83687
Sosa Enterprises. LLC (W122778)	OUST E CASPIAN DR NAMIFA ID 05007
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction	on and Public Utilities
ServicesManufacturingMiningFinance, Insurance, and Real Estatement	Submit Certificate of Assumed Business te Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: DANIEL SOSA	Secretary of State 450 North 4th Street PO Box 83720
8051 E CASPIAN DR NAMPA ID 83687	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgm: copy is (if other than # 4 above): DANIEL SOSA 8051 E CASOUAB DR NAMPA ID 83687	ent
	Secretary of State use only
ignature:	-
rinted Name: DANIEL SOSA	_
Capacity/Title: OWNER	_
ignature:	_
Printed Name:	IDAHO_SECRETARY OF STATE
Capacity/Title:	### ##################################

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