



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

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

Chalk Medical Esthetics

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Cheryl Splaine

(Name) (Address)

11152 W State Street Star, ID 83644

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Construction	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Cheryl Splaine

(Name)

1210 Stallion Spring Way

(Address)

Middleton

ID

83644

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Cheryl Splaine

Signature: Cheryl Splaine

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

10/18/2017 05:00

CK: CASH CT: 158010 BH: 1607811  
1@ 25.00 = 25.00 ASSUM NAME #2

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