



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.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

SEP 15 AM 8:43

STATE OF IDAHO

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

Skincare Solutions

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

Name

Complete Address

Debora K. Green

14764 Hensen Dr., Nampa, ID 83651

Timothy J. Green

14764 Hensen Dr., Nampa, ID 83651

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 | |

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

4. The name and address to which future correspondence should be addressed:

Debora K. Green

14764 Hensen Dr.

Nampa, ID 83651

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

Phone number (optional):

(208) 461-8431

Secretary of State use only

Signature: Debora K. Green

(signature required)

Printed Name: Debora K. Green

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\compliance\forms\abn.pdf
Revised 04/2003

IDAHO SECRETARY OF STATE
09/15/2003 05:00
CK: 4265 CT: 158810 BH: 701632
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 68867