Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2017 FEB -6 AM 11: 01

		Filing fee: \$25.00.			SECRETARY OF STATE
1.	The assume	d business name	which the undersign	ned	STATE OF IDALION of business is:
	Be-YOU-tiful you by Julie				
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):				
	Julie Ann Pate P o Box 717 Counci			il, IC	83612
	(Name)	· · · · · · · · · · · · · · · · · · ·	(Address)		
	(Name)		(Address)		
	(Name)		(Address)		
	(Name)		(Address)		
3.	The general	type of business	transacted under the	e as	sumed business name is:
	Retail Tr	ade	Construction		☐ Transportation and Public Utilities
	Wholesa	ale Trade	Agriculture		Mining Mining
	Services	3	Manufacturing		Finance, Insurance, and Real Estate
4.	Mailing address for future correspondence:			5.	Name and address for this acknowledgment copy is (if other than # 4):
	Julie Pate				
	(Name) P O Box 71	7			(Name)
	(Address)				(Address)
	Council, ID	83612 (Stat	e) (Zipcode)		(City) (State) (Zipcode)
	(3).27	,~	z, (Elpoda)		(City) (City)
Printed Name: Julie Pate					Secretary of State use only
Sig	nature 🛴	elealla			IDAKO SECRETARY OF STATE
Printed Name:					02/06/2017 05:00
					CK:8069 CT:158010 BH:1567567 16 25.00 = 25.00 ASSUM NAME #2
ڪاڙ	gnature:	· · · · · · · · · · · · · · · · · · ·			· ,
Pri	inted Name:			D191951	
Sic	Signature:				Viti i Si