



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

03 OCT -2 PM 3:39

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Take 5 on 10th Hair Design

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

Name

Nicole Lee

Susanne Jones

Joy Drake

Sally McMinn

Complete Address

105 N. 10th St.

W. I. C. B.

U. S. C. B.

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

<input 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:

Nicole C. Lee

105 N. 10th St.

Boise, ID 83702

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

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

Phone number (optional):

Signature: Nicole C. Lee
(signature required)

Printed Name: Nicole C. Lee

Capacity/Title: Manager

(see instruction # 8 on back of form)