



# 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**

7000 JAN -2 PM 2:00  
STATE OF IDAHO  
SECRETARY OF STATE

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

A NEW DAWN

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

<u>PATRICIA IRMER</u>	<u>LISA CANTERBURY-WOOD</u>
<u>ROBIN LINDBERG</u>	<u>6601 1802 A ST</u>
<u>MARY NEWMAN</u>	<u>CDA ID 83814</u>

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"/> <i>BEAUTY SHOP</i> 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:

A NEW DAWN SALON  
1802 A ST  
COEUR D'ALENE ID 83814

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

ROBIN LINDBERG  
PO BOX 45  
CAREYWOOD ID 83809

Signature: Patricia S. Irmer  
(signature required)

Printed Name: Patricia S. Irmer

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Phone number (optional):

(208) 667-3348

Secretary of State use only

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IDAHO SECRETARY OF STATE  
01/02/2003 05:00  
CK: 2030 CT: 166173 BH: 654383  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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