



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See Instructions on reverse.)

FILED

To the SECRETARY OF STATE, STATE OF IDAHO

98 AUG 28 PM 3:05

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

SECRETARY OF STATE
STATE OF IDAHO

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

Professional hair Design

- The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

| Name | Complete Address |
|-----------------------------|----------------------------|
| <u>Anjanette Viehweg</u> | <u>921 W. Main</u> |
| <u>Michael Carl Viehweg</u> | <u>Middleton, ID 83644</u> |

- The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

- The name and address to which future correspondence should be addressed: Phone number (optional): _____

Professional hair Design
921 W. Main
Middteton, ID 83644

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

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

Signature: Anjanette Viehweg
 Printed Name: Anjanette Viehweg
 Capacity: Owner

(see instruction # 8 on back of form)

Secretary of State use only
 IDAHO SECRETARY OF STATE

08/31/1998 09:00
 CK: 4062 CT: 103369 BH: 140983

1 @ 20.00 = 20.00 ASSUM NAME

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