

CERTIFICATE OF ASSUMED BUSINESS NAME

	FILE.		
	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.		
	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: HAIRMASTERS		
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		
	REGIS CORP. 7201 METRO BOULEVARD		
	C 143168 MINNEAPOLIS, MINNESOTA 55439		
3.	The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities		

HAIRMAST	TERS
The true name(s) and business address(es) of business under the assumed business name:	f the entity or individual(s) doing
Name	Complete Address
REGIS CORP.	7201 METRO BOULEVARD
C143168	MINNEAPOLIS, MINNESOTA 55439
3. The general type of business transacted under Retail Trade Transportation and	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: REGIS CORP. 7201 METRO BOULEVARD	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
 MINNEAPOLIS, MINNESOTA 55439 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional): 952-947-7777
	Secretary of State use only
gnature: (signature required) rinted Name: SHRINIVAS KOLATKAR apacity/Title: TREASURER (see instruction # 8 on back of form)	E002 E002 Government Formation F

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