



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.

2006 JAN 21 PM 4:48

STATE OF IDAHO

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

Curl up and Dry

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

Shawna A. Hopkins
at Curl up & Dry

3420 Mallard Drive
Island Park, Idaho
83429

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 Handwritten | <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:

Curl up & Dry
PO Box 35
MACK Inn, Idaho 83433

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

Signature: Shawna A. Hopkins
(signature required)

Printed Name: SHAWNA A. HOPKINS

Capacity/Title: owner/landlady
(see instruction # 8 on back of form)

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

Phone number (optional):

1-208-558-9864
1-208-654-0635

Secretary of State use only

072386

9 Your information forms labor 665
Revised 04/2003

IDAHO SECRETARY OF STATE
01/22/2004 05:00
CK: 12188796211NJO CT: 172899 DH: 722978
1 @ 25.00 = 25.00 ASSUM NAME # 2