

## 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. Instructions are included on back of application.

## FILED EFFECTIVE

2016 APR -4 PM 4: 43

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under business is:     Satori Salon	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Hats OFF UC  (W 131970)	
3. The general type of business transacted und  Retail Trade Transportation a Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  71739 S. Guldsmith € Mendian W S3L4+Z  Hendian W S3L4+Z  Hods Off LLC  5. Name and address for this acknowledgment copy is (if other than # 4 above):	er the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: Dentine  Printed Name: Nadine P. Jenkins  Capacity/Title: OFFICER  Signature:  Printed Name:	Secretary of State use only  IDAHO SECRETARY OF STATE  04/04/2016 05:00  CK:3747124 CT:172099 BH:1521972  16 25.00 = 25.00 ASSUM NAME #4  D185527

Capacity/Title:\_\_\_\_\_