



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.

07 OCT -3 AM 8:35

SECRETARY OF STATE
STATE OF IDAHO

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

Wild West Hair & Nails

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

Rebecca Yurian

1243 Filer Avenue E Twin Falls

83301

Rochelle Shank

1243 Filer Avenue E Twin Falls

83301

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 | <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:

Wild West Hair & Nails

1243 Filer Avenue E

Twin Falls, ID 83301

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

Rebecca Yurian

2602 E 600 S

Declo, ID 83323

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):

208-969-0000/208-731-9812

Secretary of State use only

Signature

Rebecca Yurian Rochelle Shank
(signature required)

Printed Name:

REBECCA YURIAN - ROCHELLE SHANK

Capacity/Title:

OWNER OWNER
NAIL TECH - COSMETOLOGIST

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
10/03/2007 05:00
CK: 4746 CT: 210102 BH: 1078587
1 @ 25.00 = 25.00 ASSUM NAME # 2

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