

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

11 AUG 18 AM 8:51

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAMO

	01. 112. 01 12. 010
 The assumed business name which the business is: 	undersigned use(s) in the transaction of
Kaiserman Hair I	Design
2. The true name(s) and <u>business</u> address business under the assumed business Name <u>Name</u> <u>Kierra Kouserman</u>	S(es) of the entity or individual(s) doing name: Complete Address COMPLETE Address NAMEA ID COMPANY COMPAN
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Constructi Services Agriculture Manufacturing Mining Finance, Insurance, and Real Est	e Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Kierra Kauerman 2513 PMEL DL. Vampa TD 831651	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	ment
	Secretary of State use only
Signature JUNA MUSERMA	
Printed Name: Kierra Kousermo	
Capacity/Title: Outron	
Signature:	IDANO SECRETARY OF STATE @B/18/2011 95:99
Printed Name:	CK: 1248 CT: 261655 8H: 1285974 1 0 25.00 = 25.00 ASSUM WAME 1 2
Capacity/Title:	<u> </u>

abn.pmd Rev. 07/2010

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