



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.

08 AUG 13 AM 8:26

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

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

Nails by Sharon

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Sharon Grisham

Complete Address

PO Box 892, Glenns Ferry, ID 83623

3. The general type of business transacted under the assumed business name is:

Retail Trade

Wholesale Trade

Services

Manufacturing

Finance, Insurance, and Real Estate

Transportation and Public Utilities

Construction

Agriculture

Mining

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

4. The name and address to which future correspondence should be addressed:

Sharon Grisham dba Nails by Sharon

PO Box 892

Glenns Ferry, ID 83623

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Secretary of State use only

Signature:

Sharon Grisham
(signature required)

Printed Name:

Sharon Grisham

Capacity/Title:

Owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE
08/13/2008 05:00
CK: 1002 CT: 150010 BH: 1131405
1 @ 25.00 = 25.00 ASSUM NAME # 2

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