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CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned Pil 2: 37 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: SHAPES SALON				
2.	The true name(s) and business address(business under the assumed business n <u>Name</u> DONALD HOSFORD HEATHER HOSFORD	ame is/are: <u>Com</u> 412 Sherman A	or individual(s) doing nplete Address Ve., Coeur d'Alene, ID 83814 ve., Coeur d'Alene, ID 83814	
	 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate KX Services Construction Mining 4. The name and address to which future Phone number (optional):			
5.	HEATHER HOSFORD 412 Sherman Ave. Coeur d'Alene, ID 83814 5. Name and address for this acknowledgment copy is (if other than # 4 above): HEATHER HOSFORD (Shapes Salon)		Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	412 Sherman Ave. Coeur d'Alene, ID 83814 ure: HEATHER HOSFORD ity: Manager (see instruction # 8 on back of form)	g. toorpiformstahn p65 Revision 1/98	Secretary of State use only IDAHO SECRETARY OF STATE 10/18/1999 89:00 CK: 1578 CT: 2998 BH: 256850 1 0 20.00 = 28.00 ASSUM NAME # 2 D30072	