CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

08 OCT 24 AM 8: 49

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

Vue Salon a	and Spa
The true name(s) and business address(es) or business under the assumed business name:	, , , , , , , , , , , , , , , , , , ,
3. The general type of business transacted unde	er the assumed business name is:
 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Davian and John Whitaker	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
134 W. Temple Ave., Arco, ID 83213	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
The Development Company	·
299 E. 4th N.	Secretary of State use only
Rexburg, ID 83440	State Prepaid 5753
Signature: <u>Dan an Whitaker</u>	SOUTUPE SECRETARY OF STA
Printed Name: Davian Whitaker	Somstand form
Capacity/Title: Owner	IDAHO SECRETARY OF STA

1 & 25.88 CT 5753 BH: 1141538 25.88 ASSUM NAME # 2