

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 09 OCT 14 PM 1:21

SECRETARY OF STATE
STATE OF IDAHO

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

(see instruction #8 on back of form)

The assumed business name which the undersign business is: HAIR FEACE	
TRACY KILGORE 46	Complete Address 625. COLE ROAD BOISE, 10 625. COLE ROAD BOISE, 10 83709
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: HAIR PEACE HOLOZ S. COLE ROAD BOISE INDIA 337000	
5. Name and address for this acknowledgment copy is (if other than # 4 above): RAUDENE CONDON PAOT W. CORY LANC BOISE LOALID 83704 Signature & AMARIE CONDON Printed Name: RAYNENE CONDON Capacity/Title: CWNER	Secretary of State use only IDAHO SECRETARY OF STATE 19/14/2009 05:00

IDAHO SECRETARY OF STATE 10/14/2009 05:00 CK: CASH CT: 158010 BH: 1191078 LE 25.00 = 25.00 ASSUM NAME # 2

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