



# 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.

AUG 3 3 33 PM '01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

Annie Skin

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

Name

Taya Grazian

Roy Grazian

Jason Grazian

Complete Address

4359 Wood Acres Ct, Boise Id. 83705

5014 Grower St., Boise, Id. 83705

5014 Grower St., Boise Id. 83705

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

Annie Skin

4359 Wood Acres Ct.

Boise, Id. 83705

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

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

Phone number (optional):

Secretary of State use only

Signature: Taya Grazian

Printed Name: Taya Grazian

Capacity: Partner

(see instruction # 8 on back of form)

g:\corporations\forms\abn.p65  
Revised 01/2001

IDaho SECRETARY OF STATE  
08/06/2001 05:00  
CK: CASH CT: 149669 BH: 411654  
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 47339