

## **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. 2014 AUG 25 AM 9: 12

## Please type or print legibly. Instructions are included on back of application.

The assumed business name which the undersign business is:      Wink Salon	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  LISA M.JONNSON  H	entity or individual(s) doing  Complete Address  1010 N. HESS St.  ayden, Inc. 83835
3. The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:    Construction   Co	
Signature DM DMSON  Capacity/Title: OWNLY	Secretary of State use only  IDAHO SECRETARY OF STATE  08/26/2014 05:00  CK:NO CK# CT:300469 BH:14388

10 25.00 = 25.00 ASSUM NAME #2

M7338/

Signature: \_\_\_\_\_

Printed Name:

Capacity/Title: