

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



FILED/EFFECTIVE

NOV 26 AM 10:18

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned uses in the transaction of business is:

Teri's Nail Nook

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

Name

Complete Address

Teri Lynn Christensen

5605 200 W Heyburn

Idaho

83336

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

☒

Services

☐

Construction

☐

Mining

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

Phone number (optional): _____

Teri Lynn Christensen

560 S 200 W

Heyburn, ID 83336

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

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

Signature: _____

Teri Lynn Christensen

Printed Name: Teri Lynn Christensen

Capacity: owner-operator

(see instruction # 8 on back of form)

BOARD SECRETARY OF STATE

06/12/2000 09:00
CK: 529 CI: 87569 BH: 325565

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 36566