



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.
Filing fee: \$25.00.

2017 AUG 21 AM 9:28

SECRETARY OF STATE
STATE OF IDAHO

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

B Sculpted Skin Care Studio

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Be Swanky, LLC 139 River Vista Place Suite 102B, Twin Falls, ID 83301

(Name) W147381 (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

Be Swanky, LLC

(Name)

139 River Vista Place, Suite 102B

(Address)

Twin Falls, ID 83301

(City) (State) (Zipcode)

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

Becky Cresto

(Name)

456 Corner Ave

(Address)

Twin Falls ID 83301

(City) (State) (Zipcode)

Printed Name: Becky Cresto

Signature: *Becky Cresto*

Printed Name: *B*

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

08/21/2017 05:00

CK:1204 CT:344407 BH:1599064

1@ 25.00 = 25.00 ASSUM NAME #2

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