



CERTIFICATE OF ASSUMED BUSINESS NAME

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

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.

01 FEB -5 PM 2:32
SECRETARY OF STATE
STATE OF IDAHO

FILED/EFFECTIVE

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

Homebound hair & nail care

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

Deneece Bush 1911 E. 17th St. #49 Idaho Falls, ID 83404

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): (208) 552-0614

Deneece Bush
1911 E. 17th St. #49
Idaho Falls, ID 83404

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: Deneece Bush

Printed Name: Deneece Bush

Capacity: _____

(see instruction # 8 on back of form)

Revision 12/99

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Secretary of State use only
IDAHO SECRETARY OF STATE

02/06/2001 09:00
CK: 2568 CT: 141831 BH: 377021

1 @ 20.00 = 20.00 ASSUM NAME # 2

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