S

(see instruction # 8 on back of form)



## **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.

10 JAN 19 AM 9: 30

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

	STAIL OF IDEAS
1. The assumed business name which the un	dersigned use(s) in the transaction of
business is:	
ABY SKINL AND	F
2. The true name(s) and business address(es	s) of the entity or individual(s) doing
business under the assumed business nam	ne: Complete Address
Name	
A BEAUTIFUL YOU I've	105 ± 100 0000 De 200
JOAN HANKEL	Court Hene = D 83814
<u>C 110989</u>	
3. The general type of business transacted un	nder the assumed business name is:
43 Ketali Hade	and Public Utilities
Wholesale Trade Construction	
Services	Submit Certificate of
✓ Manufacturing	Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate	Haine and \$20.00 lee to.
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson  Basement West
some co # 2	PO Box 83720
SHILL WS	Boise ID 83720-0080
	208 334-2301
	nt Phone number (optional):
5. Name and address for this acknowledgme	····
CODY IS (if other than # 4 above).	208-667-9468
	Secretary of State use only
	8
~ ~ LO	uders 7
gnature: (signature required).	042200
inted Name:HANKC	Corputormistation formstation for the
apacity/Title: Own - CEO	I DAND SECRETARY OF STATE