

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

See instructions on reverse before filing.

| | NOTE: See instructions on reverse before | re filing. | |
|----|--|-----------------------------|---|
| 1. | The assumed business name which the un business is: Main Street Hair and | | |
| 2. | The true name(s) and business address(est business under the assumed business name Name | 6) of the er ne: 8122 | Complete Address |
| 3. | The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Services Submit Certificate of | | |
| | ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate | | Assumed Business Name and \$25.00 fee to: |
| 4. | The name and address to which future correspondence should be addressed: Lindsey Jost 8172 Main Shreet Catrolium, TD 83858 | | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. | Name and address for this acknowledgme copy is (if other than # 4 above): | nt | Phone number (optional): (208) Let 2503 |
| _ | | Mabn.p65 | Secretary of State use only |

Signature: (signature required)

Printed Name: (Signature required)

Capacity/Title:

(see instruction # 8 on back of form)

corpiformstabn formstabn.pt Revised 04/2003

IDAHO SECRETARY OF STATE

93/26/2008 05:00

CK: 7789 CT: 224188 BH: 1106644
1 8 25.00 = 25.00 ASSUM NAME # 2

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