

## **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. 11 AUG -2 AM 9: 13

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

CANYO	ON CAR WASH
The true name(s) and <u>business</u> address business under the assumed business name     Name     Lisa A. Boisvert	
3. The general type of business transacted  Retail Trade  Transportat  Wholesale Trade  Construction	ion and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:     Lisa Boisvert	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
1111 12th Ave South, Nampa ID. 83651	208 334-2301
5. Name and address for this acknowledge copy is (if other than #4 above):	nent
Signature: Paul Dimeit	Secretary of State use only
Printed Name: Lisa Boisvert	-
Capacity/Title: Director	TRANS SEPECTARY OF STATE
Signature:	IDAHO SECRETARY OF STATE  08/02/2011 05:00  CX: 707 CT: 261281 BH: 1284955  1 0 25.80 = 25.00 ASSUM NAME # 2
Capacity/Title: Co-Director	D149242

abn.pmd Rev. 07/2010