



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned 09 JUL 22 AM 8:58  
gives notice of adoption of an Assumed Business Name.

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

Pete's Custom Auto Detailing

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

<u>Peter L. Geist</u>	Name	Complete Address
		<u>235 9th Ave East Twin Falls 10</u>
		<u>83301</u>
		_____
		_____
		_____

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

(mark only those that apply)

<input 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.

235 9th Ave East

Twin Falls 10 83301

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

Please Fax if possible to -

208-733-6112 Attn Dorothy

Signature: Peter L. Geist

Printed Name: Peter L. Geist

Capacity: President/Owner

(see instruction # 6 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE

07/22/1999 09:00  
CK: 1415 CT: 110294 BH: 235049

1 # 20.00 = 20.00 ASSUM NAME # 2

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