



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.

NOTE: See instructions on reverse before filing.

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

PTD - AUTO - DETAIL

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

Name

Complete Address

Wilson Enterprises 3357 S. Peoria St.
(C-140715) Meridian Meridian ID. 83642

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

3357 S. Peoria St.
Meridian ID. 83642

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

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

Phone number (optional):

Secretary of State use only

Signature: Ed Wilson

Printed Name: Ed Wilson

Capacity: OWNER

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE
10/18/2001 05:00
CK: 1032 CT: 140879 BH: 425060
1 @ 20.00 = 20.00 ASSUM NAME # 2

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FILED/EFFECTIVE
01 OCT 18 PM 2:15
STATE OF IDAHO