



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned 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:

Wilson's Radiator Repair

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

**Name**

**Complete Address**

DALLAS, INC.

164 3rd Ave. S., Twin Falls, ID

157241

83301

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: Phone number (optional): \_\_\_\_\_

P.O. Box 2786

Twin Falls, ID, 83303-2786

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

P.O. Box 162

Twin Falls, ID 83303-0112

Signature: [Signature]

Printed Name: Dallas Wilson

Capacity: Incorporator/President

(see instruction # 8 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

01/12/2001 09:00  
CX: 101 CT: 140737 BH: 372348

1 @ 20.00 = 20.00 ASSUM NAME # 3

① 41795