## APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G20000004039

Fictitious Name to be Registered: HAPPY WALLET QUALITY AUTO REPAIR

Mailing Address of Business: **DWYER AUTOS LLC** 

181 10TH AVENUE NW NAPLES, FL 34120-206

Florida County of Principal Place of Business: MULTIPLE

**FILED** Jan 09, 2020 FEI Number: 84-3831503 Secretary of State

Owner(s) of Fictitious Name:

**DWYER AUTOS LLC** 181 10TH AVE NW NAPLES, FL 34120 US

Florida Document Number: L19000289460

FEI Number: 84-3831503

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

DAVID DWYER	01/09/2020
Electronic Signature(s)	Date

Certificate of Status Requested (X) Certified Copy Requested (X)