

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.

Oct 15 II in M 'OI

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

SPIDER Covering	
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name: Name Twilegar	entity or individual(s) doing Complete Address
Brian Twiligar 4408 Brock Smith 4408	Odens Garden City, IN837 anons Carben City, IN 837
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture	Submit Certificate of
ManufacturingMiningFinance, Insurance, and Real Estate	Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Spill R Covering 4408 adams Garden City, FD 93714	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):
	Secretary of State use only
nted Name: Brian Twilegar pacity: Partner	

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