



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2018 SEP 13 PM 1:02

SECRETARY OF STATE

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

SPECTRUM WAVE PAINTING

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

SAUL BENJAMIN PABLO 200 DONNA DR IDAHO FALL , ID 83402

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

*Same  
Person as  
LIC  
wants to file*

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

☐ Retail Trade

☒ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☐ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

SAUL BENJAMIN PABLO

(Name)

200 DONNA DR

(Address)

IDAHO FALLS

ID.

83402

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: SAUL BENJAMIN PABLO

Signature: *[Signature]*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

09/13/2018 05:00

CK:90 CT:362557 BH:1664018

1@ 25.00 = 25.00 ASSUM NAME #2

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