

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

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Please type or print legibly. NOTE: See instructions on reverse before filing.

NOTE: See instructions on reverse policy	SFOD
The assumed business name which the unders business is:	
Computer and Boyon Technology	y Repair
2. The true name(s) and business address(es) of business under the assumed business name: Name William Woods of Martin 3	the entity or individual(s) doing Complete Address
3. The general type of business transacted under Retail Trade Transportation and	1
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: 3917 Nero, Pacido, TD &3204	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): 209-380-9640
	Secretary of State use only
Signature: 11 Matica	003 003
Printed Name: William Woods of Martin	Sign material constitution of the constitution
Capacity/Title: Owner	10 10 10 10 10 10 10 10 10 10 10 10 10 1
(see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 93/11/2011 05=00 CK: 1032 CT: 158010 BH: 1263775 1 0 25.00 = 25.00 ASSUM NAME # 2