

## 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.

2015 JAN - 5 PM 1: 16

## Please type or print legibly. Instructions are included on back of application.

SECRE STATE OF IDAHO

Q&A Computing			
~	<del></del>	<del></del>	
2. The true name(s) and <u>business</u> a		ntity or individual(s) doing	
Name	and the contraction of the second of the sec	Complete Address	
Aquila Kashino, Aquila Corp	207 Galer	na Drive, PO Box 4276, Hailey, ID 83333	
(C204576)			
	<del></del>		
3. The general type of business tra	nsacted under the a	assumed husiness name is:	
	nsportation and Put		
	nstruction		
	riculture	<del></del>	
☐ Manufacturing ☐ Mir	ning	Submit Certificate of	
Finance, Insurance, and R	•	Assumed Business Name and \$25.00 fee to:	
		i vaine and <b>\$25.00</b> 166 (0;	
<ol> <li>The name and address to which correspondence should be addre</li> </ol>	· · ·	Secretary of State	
Q&A Computing	733CU.	450 North 4th Street PO Box 83720	
PO Box 4276	<del></del>	Boise ID 83720-0080	
Hailey, ID 83333		208 334-2301	
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<ol><li>Name and address for this acknowledge.</li><li>copy is (if other than # 4 above):</li></ol>	wieagment		
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		Secretary of State use only	
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inted Name: Aquila Kashino		10AHO SECRETARY OF STATE 01/05/2015 05:00	
apacity/Title: Owner/President	<del></del>	CK:5134 CT:304784 BH:145	
	<del></del>	16 25.00 = 25.00 ASSUM NA	
gnature:		D175890	
inted Name:		からし	
anacity/Title <sup>,</sup>	i		

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