

228

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

2006 JAN -9 AM 8: 03

To the SECRETARY OF STATE, STATE OF IDAHO

SECRETARY OF STATE
STATE OF IDAHO

Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice of the action(s) indicated below:

1. The assumed business name is: Integrity Therapeutic Services
2. The assumed business name was filed with the Secretary of State's Office on 06/14/2001 as file number D46096
3. ☐ Cancellation. The persons who filed the certificate no longer claim an interest in the above assumed business name and cancel the certificate in its entirety.
4. ☐ The assumed business name is amended to: _____
5. ☒ The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:

Add:	Delete:	Name:	Address:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Lorinda L. Sanders</u>	<u>P.O. Box 783 Weiser, Idaho 83672</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Lorinda L. Pratt</u>	<u>P.O. Box 783 Weiser, Idaho 83672</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

6. ☐ The type of business is amended to read:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining
7. ☒ The name and address to which future correspondence should be addressed is changed to read:

Lorinda L. Sanders P.O. Box 783 Weiser, Idaho 83672

8. Name and address for this acknowledgment copy is:

Integrity Therapeutic ServicesP.O. Box 783Weiser, Idaho 83672Signature: Lorinda L. SandersPrinted Name: Lorinda L. SandersCapacity: proprietor

(see instruction # 9 on back of form)

Secretary of State use only

 9. Complete and return to the Secretary of State
 Revised 04/2003

IDAHO SECRETARY OF STATE

01/09/2006 05:00

CK: 697465 CT: 172899 BH: 938715
1 @ 10.00 = 10.00 ASSUM AMEN # 2