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CANCELLATION OR AMENDMENTICED EFFECTIV
CERTIFICATE OF ASSUMED BUSINESS NAME AM 9: 33
(Piesse type or print legibly)
To the SECRETARY OF STATE, STATE OF IDAHO   SECRETARY OF STATE     Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice   STATE OF IDAHO     of the action(s) indicated below:   I. The assumed business name is: SUCCESSFUL LIVING INSTITUTE     1. The assumed business name is:   SUCCESSFUL LIVING INSTITUTE
2. The assumed business name was filed with the Secretary of State's Office on as file number
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. A 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:
ADD _ SARAH COHEN 2587 W WOLF RAPIDS
D D DRIVE.
MERIDIAN, 10 83646
6. The type of business is amended to read:
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining
7. X The name and address to which future correspondence should be addressed is changed to read:
SUCCESSFUL LIVING INSTITUTE, 2587 W WOLF RAPLES DRIKE
8 Name and address for this acknowledgment CODY IS.
SARAH LOHEN TEL: 208-288-2090
2587 W WOLFRAPLOS DRIVE Becretary of State use only
MERIDIAN . 10. 83646
Signature: Navah Other
Printed Name: SARAH (SHEN
Capacity: OWNER D110895
(see instruction # 9 on back of form)
12/26/2007 CK: 2623 CT: 228836 B4 1 # 18.68 = 18.68 A55

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