



CANCELLATION OR AMENDMENT FILED EFFECTIVE OF CERTIFICATE OF ASSUMED BUSINESS NAME

2013 SEP -4 PM 3:18

SECRETARY OF STATE
STATE OF IDAHO

(Please type or print legibly. Instructions are included on the back of the application.)

1. The assumed business name is: The Creperie
2. The assumed business name was filed with the Secretary of State's Office on July 28 2010 as file number D141021
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: The Creperie Mobile
5. ☐ The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:

<u>Add:</u>	<u>Delete:</u>	<u>Name:</u>	<u>Address:</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Finance, Insurance, and Real Estate
7. ☐ The name and address to which future correspondence should be addressed is changed to read:
4096 W. Gillette Dr. Meridian, ID 83642

8. Name and address for this acknowledgment copy is:

William Loverde4096 W. Gillette Dr.Meridian, ID 83642Signature: *William Loverde*Printed Name: William Loverde

Capacity: _____

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
 09/04/2013 05:00
 CK: CASH CT: 150010 BH: 1380716
 1 @ 10.00 = 10.00 ASSUM AMEN # 2

D141021