CANCELLATION OR AMENDMENT DEFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDA	ATIO .		
Pursuant to Section 53-507 and 53-508, le	daho Code, the	undersigned gives notice	
of the action(s) indicated below:	•	STATE OF IDAH	AIL
Of the density of the second	1 1/2	- 1 North	<i>)</i>
1. The assumed business name is: Southwe	estern GIFTS C	Country Office	
2. The assumed business name was filed with on 8/14/2008 as file number D68	001	- •	
3. Cancellation. The persons who filed the the above assumed business name and	e certificate no l d cancel the cer	onger claim an interest in tificate in its entirety.	
4. The assumed business name is amend			
5. The true names and business address business under the assumed business	ses of the entity s name are ame	nded as follow:	
Add: Delete: Name:	Y1.	Address:	
	<u> </u>	The Control of the Co	
en e	•		
			1
The time of business is amended to If	ead.		
6. The type of business is amended to re		Anthony and Dublic I Miliaico	
Retail Trade	ing 🗌 Transp	ortation and Public Utilities	
Retail Trade Manufacturi Wholesale Trade Agriculture	ing	e, Insurance, and Real Est	
Retail Trade	ing	e, Insurance, and Real Est	
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Retail Trade	ing Transp Financ n Mining re correspondent t copy is:	e, Insurance, and Real Est	