FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)

To the SECRETARY OF STATE, STATE OF II Pursuant to Section 53-507 and 53-508, of the action(s) indicated below:	DAHO STATE OF STATE Idaho Code, the undersigned gives notice
1. The assumed business name is: The Track I	Doctor
The assumed business name was filed with on3/28/05 as file number	
 Cancellation. The persons who filed the above assumed business name and 	he certificate no longer claim an interest in nd cancel the certificate in its entirety.
4. The assumed business name is amen	ded to:
5. The true names and business address business under the assumed business	ses of the entity or individuals doing s name are amended as follow:
Add: Delete: Name:	Address:
6. The type of business is amended to re	ead:
Retail Trade Manufactur Wholesale Trade Agriculture Services Constructio	Finance, Insurance, and Real Estate
7. The name and address to which futur is changed to read:	re correspondence should be addressed
Name and address for this acknowledgment	convis:
Robert Stone	33
563 E. St. Kitts	
Meridian, Idaho 83642	Secretary of State use only
Signature: Sulut Stane	g/corpiforms/abnamend.pmd Revesed 04/2003
Printed Name: Robert Stone	Revised 04/2003
Capacity: Owner	aphtoms
(see instruction # 9 on back of form)	9 6