CANCELLATION OR AMENDMENT 1013 OCT 18 PM 4: 16 OF CERTIFICATE OF ASSUMED BUSINESS NAME

SECRETARY OF STATE STATE OF IDAHO

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

1.	The ass	umed b	usiness name is: Go Lead Id	aho	
2.	 The assumed business name was filed with the Secretary of State's Office on01/27/12 as file number 				
3.				e certificate no longer claim an interest in d cancel the certificate in its entirety.	
4.	Th	e assun	ed business name is amend	ed to:	
5.	✓ Th	e true n siness u	ames and business address inder the assumed business	es of the entity or individuals doing name are amended as follow:	
	Add:	Delete:	Name:	Address:	
		abla	Karianne Fallow	1365 W. Kenai Ct., Eagle, Idaho 83616	
		\square	Anne Wilde	4874 E. Dry Kin Ct., Boise, Idaho 83716	
	1 71	П	Go Lead Idaho, Inc. C/99	9/6 1365 W. Kenai Ct., Eagle, Idaho 83616	
7.			and address to which future I to read:	correspondence should be addressed	
8.	Name and address for this acknowledgment copy is: Karianne Fallow				
	1365 W. Kenai Ct.				
	Eagle, Idaho 83616				
ınatu	ıre:	1		Secretary of State use only	
nted	Name: _k	(arianne l	allow	•	
	ty: Preside				
gnatu	ıre:				
inted	Name:_	<u></u>			
apaci	ity:			IDAHO SECRETARY OF STA	

IDAHO SECRETARY OF STATE
10/18/2013 05:00
CK: 4464 CT: 143038 BH: 1394578
1 2 10.00 = 16.00 ASSUM AMEN \$ 2