

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE
10 SEP 27 AM 9:23

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice of the action(s) indicated below:

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name is: Kiwi Loco
2. The assumed business name was filed with the Secretary of State's Office on 19 FEB 2010 as file number D137076
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. ☐ 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 checked="" type="checkbox"/>	<u>Douglas James Burch</u>	<u>871 Grace Dr Twin Falls ID 83301</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Floyd Eugene Turley</u>	<u>661 Ridgeway Twin Falls ID 83301</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Jacob Chet Detweiler</u>	<u>4150 North 2700 East Twin Falls ID 83301</u>

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

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

7. ☐ The name and address to which future correspondence should be addressed is changed to read:

Douglas Burch 209 Woodridge Circle Twin Falls ID 83301

8. Name and address for this acknowledgment copy is:

Douglas Burch

209 Woodridge Circle

Twin Falls, ID 83301

Secretary of State use only

Signature: 

Printed Name: Douglas Burch

Capacity: Owner

Signature: _____

Printed Name: _____

Capacity: _____

D137076