Capacity:

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS No.

CERTIFICATE OF ASSUMED BUSINESS 2 NAME (Please type or print legibly. Instructions are included on the back of the application.)

(Flood type of printing by this ductions are n	SECRETARY OF STATE
To the SECRETARY OF STATE, STATE OF IDA	AHO STATE OF IDAHO
Pursuant to Section 53-507 and 53-508, I	daho Code, the undersigned gives notice
of the action(s) indicated below:	
 The assumed business name is: Paroozle, Mile 	i
 The assumed business name was filed with on 2012 July 24 as file number D157054 	the Secretary of State's Office
 Cancellation. The persons who filed the the above assumed business name and 	e certificate no longer claim an interest in discarded the certificate in its entirety.
4. The assumed business name is amende	ed to:
5. The true names and business address business under the assumed business	•
Add: Delete: Name:	Address:
o o	
6. The type of business is amended to re	ad:
Retail Trade Manufacturir Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
7. The name and address to which future is changed to read:	correspondence should be addressed
Name and address for this acknowledgment of Jocelyn M Manwill	copy is:
3071 Mumbarto Ave	
Boise ID 83713	
Signature: Oour Manwill	Secretary of State use only
Printed Name: Jocelyn M Manwill	
Capacity: Founder	
Signature:	
Printed Name:	

abn amend.pmd Rev.07/2010