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

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To the SECRETARY OF STATE, STATE OF ID Pursuant to Section 53-507 and 53-508, of the action(s) indicated below:	AHO Idaho Code, the undersigned gives notice
1. The assumed business name is: Compass Do	omains
The assumed business name was filed with on as file number	the Secretary of State's Office
3. Cancellation. The persons who filed the above assumed business name an	ne certificate no longer claim an interest in did cancel the certificate in its entirety.
4. The assumed business name is amend	led to:
5. The true names and business address business under the assumed business	
Add: Delete: Name:	Address:
6. The type of business is amended to re	ead:
Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction	Finance, insurance, and Real Estate
7. The name and address to which futur is changed to read:	e correspondence should be addressed
David Lewis, 189 Appaloosa Dr., Pocate	llo, ID 83201
8. Name and address for this acknowledgment David Wwis	сору is:
189 Appaloosa Dr.	
Pocate110, ID 83201	Secretary of State use only
189 Appa 100 Sa Dr. Pocate 110, ID 83201 Signature: Devid Lewis	formal principles of the princ
Printed Name: David Lewis	
Capacity: Owner (see Instruction # 9 on back of form)	IDAHO SECRETARY OF STATE 10/23/2006 05:00
	CK: 1177 CT: 158010 BH: 982490 1 8 18.80 = 18.80 ASSUM AMEN # 2