

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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:

APR 16 AM 8:18  
SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name is: Kalisek + Kalisek

2. The assumed business name was filed with the Secretary of State's Office on 4/17/97 as file number D3547.

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 follows:

Add: Delete:

Name:

Address:

|                          |                                     |                         |                                       |
|--------------------------|-------------------------------------|-------------------------|---------------------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Joseph M Kalisek</u> | <u>2107 Julie Lane Twin Falls, ID</u> |
|                          |                                     |                         | <u>83301</u>                          |
| <input type="checkbox"/> | <input type="checkbox"/>            | _____                   | _____                                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | _____                   | _____                                 |

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 checked="" 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:

J. Michael Kalisek 340 S 2650 E Paul Idaho 83347

8. Name and address for this acknowledgment copy is:

Idaho St. Ins. Fund  
1215 W. State Street  
P.O. Box 83720  
Boise, Idaho 83720-0044

Signature: J. Michael Kalisek

Printed Name: J. Michael Kalisek

Capacity: Partner

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/16/2009 05:00  
CK: 3488 CT: 236197 DI: 1166274  
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D3547

FILED EFFECTIVE