Capacity: _ nwnan

(see instruction # 9 on back of form)

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

OLIVI	(Please type or print legioly)		11
To the SECRETARY OF ST Pursuant to Section to the action(s) indicates	ATE, STATE OF IDAHO 53-507 and 53-508, Idaho ated below:		ce
on 2 // 2	s file number <u>0/5</u> 788		t in
the above assumed bu 4. The assumed bu 5. The true names business under Add: Delete:	siness name is amended l	of the entity or individuals doing ame are amended as follow: Address:	·
Retail Trade Wholesale Services 7. The name and is changed to	Trade Agriculture Construction d address to which future read: E SELTICE WAY	Finance, Insurance, and Re Mining correspondence should be addres	
8. Name and address	for this acknowledgment o	Secretary of State use or	nly
Signature: <u>Oak A</u> Printed Name: <u>NoBisot</u>	S. SILUA	IDAHO SECRETARY 10/14/2003 10/14/2003 CK: 5326 CT: 78420 1 9 10.00 = 10.00	BH: 786246