

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

2014 SEP 19 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

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

1. The assumed business name is: Accessible Bathrooms
2. The assumed business name was filed with the Secretary of State's Office on December 22, 2010 as file number D144119
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:

Add: Delete:

Name:

W49061

Address:

- | | | | |
|-------------------------------------|-------------------------------------|--|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Great Western Distribution of Idaho</u> | <u>PO Box 9733, Boise, ID 83707</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Custom Home Solutions LLC</u> | <u>480 E. Franklin Rd., Meridian, ID 83642</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>W141185</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 checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Finance, Insurance, and Real Estate
7. ☒ The name and address to which future correspondence should be addressed is changed to read:
Jeff L. Mooney, 480 E. Franklin Rd., Meridian, ID 83642 Suite 108

8. Name and address for this acknowledgment copy is:

Jeff L. Mooney480 E. Franklin Rd.Meridian, ID

Signature:

Printed Name: Jeff L. MooneyCapacity: Member of LLC

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

09/19/2014 05:00

CK:5487 CT:300131 BH:1441903

1@ 10.00 = 10.00 ASSUM AMEN #2

D144119