

# CANCELLATION, CONTINUATION, OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

2002 JUL 16 AM 8:43

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:

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name is: Horse shoe Nursery
2. The assumed business name was filed with the Secretary of State's Office on 2/14/2000 as file number D-33032.
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. ☐ Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).
5. ☐ The assumed business name is amended to: \_\_\_\_\_
6. ☒ 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:Address:

- |                          |                                     |                         |       |
|--------------------------|-------------------------------------|-------------------------|-------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Anthony L. Lloyd</u> | _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Laurie A. Lloyd</u>  | _____ |
| <input type="checkbox"/> | <input type="checkbox"/>            | _____                   | _____ |

7. ☐ 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 type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining
8. ☐ The name and address to which future correspondence should be addressed is changed to read:

9. Name and address for this acknowledgment copy is:

Laurie Lloyd  
110 S. Riverdale Drive  
Horseshoe Bend ID 83629

Signature: \_\_\_\_\_

Printed Name: LAURIE A. LLOYDCapacity: AS OF 6/2000  
FORMER PARTNER/OWNER

(see instruction # 10 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
 07/16/2002 05:00  
 CK: 8360 CT: 150010 BH: 477483  
 1 @ 10.00 = 10.00 ASSUM AMEN # 2

D33032

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Revised 01/2001