

Signature:

CANCELLATION OR AMENDMENT FILED EFFECTIVE OF CERTIFICATE OF ASSUMED BUSINESS NAME 2015 OCT -5 AM 10: 04

1. The assumed business name is: Sawtooth Denta	I Handpiece Repair & Supply) FIDAHO
2. The assumed business name was filed with the Son 11/13/2000 as file number D40447	Secretary of State's Office
 Cancellation. The persons who filed the cert assumed business name and cancel the cert 	ificate no longer claim an interest in the above ificate in its entirety.
4 The assumed business name is amended to:	<u> </u>
5. The true names and business addresses of t assumed business name are amended as follows:	he entity or individuals doing business under the flows:
Add: Delete: S John T. Weiers 487 N	
(Name) (Address Add: Delete: Sawtooth Dental Rep	pair and Supply LLC $(\mu)/57007$
Add: Delete: (Name) 410 N 38 2 Grace (Address)	The state of the s
6. X The type of business is amended to:	
□ Retail Trade □ Manufacturing □ Agriculture	☐ Transportation and Public Utilities ☐ Mining
⊠ Services ☐ Construction	Finance, Insurance, and Real Estate
7. Amend mailing address for future correspondence to:	Name and address for this acknowledgment copy is:
Jason Lenz	Jason Lenz
(Name) 410 North 3826 East	(Name)
(Address)	410 North 3826 East
Rigby ID 83442	Rigby ID 83442
(City) (State) (Zipcode)	(City) (State) (Zipcode)
Printed Name: JASON LENZ	Secretary of State use only
Signature:	and the state of t
Printed Name: Bonita Lenz	IDAHO SECRETARY OF STATE 10/06/2015 05:00
Signature: Bomita Len E	CK:3242 CT:279349 BH:1495247 16 10.00 = 10.00 ASSUM AMEN #3
orinted Name:	D 40447