

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

05 MAR 25 PM 12: 50

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: SMITH'S JANITORIAL
2. The assumed business name was filed with the Secretary of State's Office on 03/09/2005 as file number D 85325.
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:	Address:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>OREL SMITH</u>	<u>450 POLELINE RD #126 TWIN FALLS, ID</u> 83301
<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 type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" 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: \_\_\_\_\_

8. Name and address for this acknowledgment copy is:

SMITH'S JANITORIAL  
3367 WEST WAVE DR  
MERIDIAN, ID 83462

Signature: Teresa M NewberryPrinted Name: TERESA M NEWBERRYCapacity: SOLE PROPRIATOR

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
 03/25/2005 05:00  
 CK: 6510 CT: 15311 BH: 800020  
 1 @ 100.00 = 100.00 CORP # 2

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