

CANCELLATION OR AMENDMENT OF CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED EFFECTIVE

se type or print legibly. Instructions are included on the back of the application — Line at the legible of the second control of th

(. 10200 sypto of prints og.s.), mod double at a mod double	Organia -
1. The assumed business name is: Sandpoint M	assage Therapy STATE STATE
2. The assumed business name was filed with on 09/24/2012 as file number D158274	
 Cancellation. The persons who filed the above assumed business name an 	ne certificate no longer claim an interest in id cancel the certificate in its entirety.
4. The assumed business name is amend	led to:
5. The true names and business address business under the assumed business	
Add: Delete: Name:	Address:
Constance Hammond	1722 Janelle Way Sandpoint, ID 83864
Constance Hammond	PO Box 434 Sandpoint, ID 83864
6. The type of business is amended to re Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction 7. The name and address to which future is changed to read: Sandpoint Massage Therapy 1722 Janelle Wa	ng Transportation and Public Utilities Mining Finance, Insurance, and Real Estate e correspondence should be addressed
Name and address for this acknowledgment	
Sandpoint Massage Therapy	сору із.
1722 Janeile Way	
Sandpoint, ID 83864	
a:	P
Signature:	Secretary of State use only
Printed Name: Constance Hammond Capacity: Owner 2008-3982511	
	10AHO SECRETARY OF STATE 03/05/2015 05:00
Signature:	CK:1409 CT:307293 BH:146480 16 10.00 = 10.00 ASSUM AMEN
Printed Name:	TO TO TO TO AGE AMEN

abri_amend.pmd Rev.07/2010

D158274