



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
2014 APR 17 AM 9:03

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

1. The assumed business name is: Health Dynamics Chiropractic

2. The assumed business name was filed with the Secretary of State's Office
on 16 Nov 1998 as file number D19966

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:

<u>Add:</u>	<u>Delete:</u>	<u>Name:</u>	<u>Address:</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<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"/> 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:

8. Name and address for this acknowledgment copy is:

Health Dynamics Chiropractic, P.A.

5983 W. State St., Ste. B

Boise, ID 83703

Signature: *Robert K. Zigler*

Printed Name: Robert K. Zigler, D.C.

Capacity: Owner (cancel OLD entity but retain S corp)

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

D19966