

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

(Please type or print legibly)  
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:

1. ☒ The assumed business name is: NATURES BALANCE
2. ☐ The assumed business name was filed with the Secretary of State's Office on 6-30-99 as file number D27292
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>STEVE CHESON</u> | <u>16327 W. LUPINE</u> |
| <input type="checkbox"/> | <input type="checkbox"/>            | _____               | _____                  |
| <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: \_\_\_\_\_

STEVE CHESON

16327 W. LUPINE

BLAISE ID 83764

Signature: SL / CH

Printed Name: STEVE CHESON

Capacity: CW/GR

(see instruction # 4 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

06/09/2000 09:00  
CK: CASH CT: 132194 BH: 324918

1 @ 10.00 = 10.00 ASSUM AMEN # 2

D27292