CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NA

CERTIFICATE OF ASSUME (Please type or print legibly. Instructions are in	ED BUSINESS NAME 9 PM 12: 53
To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, lo of the action(s) indicated below:	laho Code, the undersigned gives notice
1. The assumed business name is:	Byzz USA
2. The assumed business name was filed with to on2/25/// as file number	
3. Cancellation. The persons who filed the the above assumed business name and	certificate no longer claim an interest in cancel the certificate in its entirety.
4. The assumed business name is amende	d to:
5. The true names and business addresse business under the assumed business	•
Add: Delete: Name:	Address:
6. The type of business is amended to rea	d:
☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	☐ Transportation and Public Utilities☐ Finance, Insurance, and Real Estate☐ Mining
7. The name and address to which future is changed to read:	correspondence should be addressed
8. Name and address for this acknowledgment of	opy is:
11422 Roxbary	
Boise Id 83713	Secretary of State use only
Signature:	obtaining of other was offing
Printed Name:	
Capacity:	
Signature:	
Printed Name:	
Canacity	

abri_amend.pmd Rev.07/2010