

CANCELLATION OR AMENDMENT OF EFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

2005 MAR -4 AM 9:40

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: Sawtooth Mountain Properties2. The assumed business name was filed with the Secretary of State's Office on 1/14/97 as file number D283.3. ☐ 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>NOEL P. SITTON</u>	<u>P.O. Box 3 Stanley ID 83278</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>NOEL P. SITTON</u>	<u>P.O. Box 3 Stanley ID 83278</u>
<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 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:

Signature: _____

Printed Name: NOEL P. SITTONCapacity: Broker

(see instruction # 9 on back of form)

Secretary of State use only

g:\coop\forms\ab\forms\abamend.pmd Revised 04/2003

IDAHO SECRETARY OF STATE
 03/04/2005 05:00
 CK: 1050 CT: 150010 BH: 796606
 1 @ 10.00 = 10.00 ASSUM AMEN # 2