CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS: NAME 8: 30 (Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, I of the action(s) indicated below:	(3) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
1. The assumed business name is: LA FOLLETT	E SIDING
The assumed business name was filed with on as file number	the Secretary of State's Office
3. Cancellation. The persons who filed the the above assumed business name and	e certificate no longer claim an interest in discancel the certificate in its entirety.
4. The assumed business name is amend	ed to:
5. The true names and business address business under the assumed business	· · · · · · · · · · · · · · · · · · ·
Add: Delete: Name:	Address:
6. The type of business is amended to re	ad:
Retail Trade Manufacturir Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
 The name and address to which future is changed to read: 	e correspondence should be addressed
8. Name and address for this acknowledgment of NATHAN LAFOLLETTE	copy is:
20340 TUCKER ROAD	
GREENLEAF, IDAHO 83626	Secretary of State use only
Signature: Act. Litellett	Revised 04/2003
Printed Name: NATHAN LAFOLLETTE	Revised
Capacity: OWNER	
(see instruction # 9 on back of form)	

