CANCELLATION OR AMENDMENT OF US JUL -2 AM 8:5

CERTIFICATE OF ASSUM (Please type or print	MED BUSINESS NATMETARY OF STATE OF IDAHO
To the SECRETARY OF STATE, STATE OF I	
1. The assumed business name is: S&SHere	fords
The assumed business name was filed with on Oct 25, 1999 as file number	
3. Cancellation. The persons who filed the above assumed business name are	he certificate no longer claim an interest in nd cancel the certificate in its entirety.
4. The assumed business name is amen	ded to:
5. The true names and business addres business under the assumed busines	
Add: Delete: Name:	Address:
O O	
0 0	
6. The type of business is amended to r	ead:
Retail Trade Manufactur Wholesale Trade Agriculture Services Constructio	Finance, Insurance, and Real Estate
Liampl	re correspondence should be addressed
is changed to read:	and the second of the second o
	The state of the s
8. Name and address for this acknowledgment	copy is:
Galen M Sutphin	
PO Box 2683	
Pocatello, ID 83206	Secretary of State use only
ignature: Halm m Sutphi	Promptometer from the contract of the contract
rinted Name: Galen M Sutphin	Revierd 04/2003
apacity: General Manager (see Instruction # 9 on back of form)	D30291