

# 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: THE WINERY AT EAGLE KNOLL
2. The assumed business name was filed with the Secretary of State's Office on 5-15-0 as file number D35795.
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>MYRON (MIKE) KAUFFMAN</u>	<u>2495 E LENOX CT EAGLE ID 83616</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>MJS ENTERPRISES, INC.</u> <u>(C133786)</u>	<u>2495 E LENOX CT EAGLE ID 83616</u>
<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: \_\_\_\_\_

2495 E LENOX CT  
EAGLE ID 83616

Signature: ML Kauffman

Printed Name: ML KAUFFMAN

Capacity: Pres.

(see instruction # 4 on back of form)

g:\corp\forms\abndtag.pmf Revision 2/99

Secretary of State use only

IDAHO SECRETARY OF STATE

12/06/2000 09:00  
CK: 1131 CT: 133026 DH: 364799

1 @ 10.00 = 10.00 ASSUM AMEN # 2

FILED EFFECTIVE  
DEC 3 19 00  
SECRETARY OF STATE