## CANCELLATION OR AMENDMENT OF 10 FEB 24 AM 8: 40

CERTIFICATE OF ASSUMED BUSINESS NAME "" " " " " " " " " " " " " " " " " "
(Please type or print legibly)  SECRETARY OF STATE STATE OF IDAHO
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: <u>NATURAL HEALTH TECHNIQUES</u>
2. The assumed business name was filed with the Secretary of State's Office on
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:
6. The type of business is amended to read:
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining
The name and address to which future correspondence should be addressed is changed to read:
1069 ELK MEADOW LANE, DEARY, Idaho 83823
8. Name and address for this acknowledgment copy is:
DENICE M. MOFFAT
1069 ELK MENDOW LANK
DEARY Idaho 83823
Signature: Allii Illi Illi Illi Illi Illi Illi Ill
Signature: A MILITURE STATE  Printed Name: Denice M. Morfort  Capacity: Sunge (see instruction # 9 on back of form)  Signature: A MILITURE STATE STATE SECRETARY OF S
Capacity: OWNER IMAGE STATE
(see instruction # 9 on back of form) 2 CK: 7255 CT: 158816 BH: 1289453