

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:

FILED/EFFECTIVE

1. The assumed business name is: LifeStyle Massage Therapy Center, Inc.
2. The assumed business name was filed with the Secretary of State's Office on Feb. 8, 2000 as file number D32999.
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:☐☐☐☐☐☐

7. ☐ 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

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:

Susan L. Corless10536 Fairview Ave.Boise, ID 83704Signature: Susan L. CorlessPrinted Name: Susan L. Corless

Capacity: _____

(see instruction # 4 on back of form)

Secretary of State use only