## CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAMEECTIVE (Please type or print legibly. Instructions are included on the back of the application.) AM 9: 07

To the SECRETARY OF STATE, STATE OF ID Pursuant to Section 53-507 and 53-508, of the action(s) indicated below:	
1. The assumed business name is: ProCoffeeM	aker
<ol> <li>The assumed business name was filed with on October 11, 2005 as file number D92536</li> </ol>	the Secretary of State's Office
<ol> <li>Cancellation. The persons who filed the above assumed business name and</li> </ol>	<del>-</del>
4. The assumed business name is amend	led 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	ead:
Retail Trade Manufacturion Wholesale Trade Agriculture Services Construction	ng Transportation and Public Utilities Finance, Insurance, and Real Estate
7. The name and address to which future is changed to read:	e correspondence should be addressed
8. Name and address for this acknowledgment Tracy McElhinney	copy is:
967 East Parkcenter Blvd #370	
Boise, ID 83706	Secretary of State use only
Signature: Welling	-
Printed Name: TRACY McEllinney	100
Capacity: Owner / President	092536
Signature:	
Printed Name:	
Capacity:	