FILED EFFECTIVE

CANCELLATION 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: Sea ITh y Hab. Ts Wellaress 2. The assumed business name was filed with the Secretary of State's Office Clinic 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: |
| Kimbaci Lundahi 27 E Frie VIEW AVE Menden TP |
| 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 |
| 7. The name and address to which future correspondence should be addressed is changed to read: |
| 8. Name and address for this acknowledgment copy is: Kimball Lunda & (|
| Merichen II 43642 Secretary of State use only |
| Signature: |
| Capacity: 0014/2005 05:00 CK: 1165 CT: 185297 BH: 91165 |