CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. Instructions are included on the back of the application FFECTIVE

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, lo of the action(s) indicated below:	
The assumed business name is: Provision Financial Advisors	
 The assumed business name was filed with the Secretary of State's Office on 11/4/2008 as file number D126034 . 	
 Cancellation. The persons who filed the the above assumed business name and 	e certificate no longer claim an interest in cancel the certificate in its entirety.
4. The assumed business name is amende	ed 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:
Provision, Inc. (C132018)	10368 W. Altair Dr. Star, Id 83669
6 The type of business is amended to read:	
6. 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 of John R. Smith	copy is:
10368 W. Altair Dr.	
Star, ID 83669	Secretary of State use only
Signature: ARS	
Printed Name: John R. Smith	
Capacity: President	IDAHO SECRETARY OF STATE
Signature:	02/14/2011 05:00 CK: 1035 CT: 255493 BH: 1259969
Printed Name: 1 9 10.00 = 18.00 ASSUM AMEN #	
Capacity:	