CANCELLATION OR AMENDMENT REFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAH Pursuant to Section 53-507 and 53-508, Ida of the action(s) indicated below:	O SECRETARY OF STATE ho Code, the wholersign by gives notice
1. The assumed business name is: Boise Avenue B	ed & Breakfast
2. The assumed business name was filed with the	·
3. Cancellation. The persons who filed the countries the above assumed business name and countries.	
4. The assumed business name is amended	to:
5. The true names and business addresses business under the assumed business na	
Add: Delete: Name:	Address:
Michael S. Dingel	2389 W Boise Ave, Boise,ID 83706
6. The type of business is amended to read	
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
7. The name and address to which future co is changed to read:	orrespondence should be addressed
 Name and address for this acknowledgment cop Kristine Naiberg-Dingel 	by is:
2389 W Boise Ave	# 1 + 1
Boise, ID 83706	Secretary of State use only
Signature: Kristine Naiberg-Dingel	N910260
[*	M3/30 SECRETARY OF STATE
Capacity: Owner (see Instruction # 9 on back of form)	CK: 2375 CT: 158010 BH: 1943884
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