

SS NAME: 9:29

(Please type or print legibly. Instructions are included on the back of the application.)

SECRETARY OF STATE

STATE OF IDAHO
Interpreted gives n

- | <u>Add:</u> | <u>Delete:</u> | <u>Name:</u> | <u>Address:</u> |
|-------------------------------------|-------------------------------------|-----------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Kyle Lindley</u> | <u>205 E. Seltice Way, Ste. A, Post Falls, ID</u> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Cheryl Lindley</u> | <u>1513 E 2nd Avenue, Post Falls, ID 83854</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | | |

7. ☒ The name and address to which future correspondence should be addressed is changed to read:

Kyle Lindley Agency, LLC 205 E. Seltice Way, Ste. A, Post Falls, ID 83854

- Kyle Lindley Agency, LLC

205 E. Seltice Way, Ste. A

Post Falls, ID 83854

Signature: Kyle R. Lundgren

Printed Name: Kyle R. Lindley

Capacity: Agent / Owner

Signature: _____

Printed Name:

Capacity:

Secretary of State use only

IDAHO SECRETARY OF STATE
 10/31/2011 05:00
 CK: 1076 CT: 263778 BH: 1296340
 1 @ 10.00 = 10.00 ASSUM AMEN # 2

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