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

To the SECRETARY OF STATE, STATE OF I Pursuant to Section 53-507 and 53-508 of the action(s) indicated below:	DAHO Signed SIATE I, Idaho Code, the undersigned gladed floorice
The assumed business name is:INTERIO	ORS BY JANET
The assumed business name was filed with onSEPT. 26, 1997 as file number	
3. Cancellation. The persons who filed the above assumed business name a	the certificate no longer claim an interest in and cancel the certificate in its entirety.
4. The assumed business name is amen	nded to:
5. The true names and business address business under the assumed business	sses of the entity or individuals doing ss name are amended as follow:
Add: Delete: Name:	Address:
J & K GORRINGE, INC.	P.O. BOX 1083, BURLEY, ID 83318
✓ JANET GORRINGE	125 MAIN AUE WEST, TWIN FALL
	83301
6. The type of business is amended to r	read:
Retail Trade Manufactur Wholesale Trade Agriculture Services Constructio	Finance, Insurance, and Real Estate
 The name and address to which futur is changed to read: 	re correspondence should be addressed
125 MAIN AVENUE WEST, TWIN FALL	_S, IDAHO 83301
8. Name and address for this acknowledgment	copy is:
REGION IV DEVELOPMENT CORPORATION	
P.O. BOX 5079	
TWIN FALLS, IDAHO 83303-5079	Secretary of State use only
Signature: paral que	IDANO SECRETARY OF STATE ### COCCIDENT CONTROL OF STATE ###
Printed Name: JANET GORRINGE	IDAHO SECRETARY OF STATE
Capacity: OWNER	07/19/2004 05:00 CK: 3164 CT: 166777 PH: 756875 1 8 10.80 = 10.80 ASSIM OFF R
(see instruction # 9 on back of form)	TS see a - to o Mari Mari #