CANCELLATION, CONTINUATION, OR AMENDIFICATE OF CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF ASSUMI (Please type or print less	ED BUSINESS NAME
To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, lo of the action(s) indicated below:	AHO daho Code, the undersigned gives notice
The assumed business name is:One_M	Nore Time Trucking
2. The assumed business name was filed with the Secretary of State's Office on $\frac{08-24-01}{2}$ as file number $\frac{D-47858}{2}$.	
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. Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).	
5. The assumed business name is amend	ed to:
6. 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:
JAMES R VIBBERT	287 HWY 24 N RUPERT, ID 83350
7. The type of business is amended to re	ead:
Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
8. The name and address to which future correspondence should be addressed is changed to read:	
9. Name and address for this acknowledgment	copy is:
DL EVANS LANK	
PO BOX 1188	Secretary of State use only
BURLEY, ID 83318	888
alla Amna.	Revision 2/39
Signature! Wingf//Winger	IDANO SECRETARY OF STATE 8
Printed Name: Douglas Mounce	@
Capacity: Owner	rpyforms
(see instruction # 4 on back of form)	