## **CANCELLATION OR AMENDMENT** OF CERTIFICATE OF **ASSUMED BUSINESS NAME**

2013 APR -5 AM 9: 22

(Please type or print legibly. Instructions are included on	the back of the application)
1. The assumed business name is: MOUNTAIN MIKES STATE OF THE STATE OF	
2. The assumed business name was filed with on 10/9/01 as file number D	the Secretary of State's Office
3. Cancellation. The persons who filed the above assumed business name and	e certificate no longer claim an interest in
4. The assumed business name is amend	ŕ
5. The true names and business address business under the assumed business	
Add: Delete: Name:	Address:
□ 🛭 Michael Kirk	HCRUZ BOX 318B MOVIE SPRINGS ID 83
	MOVIE SPRINGS ID 83
Julie H Kirk	137 LYNX Rd
	MONIE SPRING IN 838
6. The type of business is amended to re	ad: 100 3(1113)3 100 020
Retail Trade Manufacturing Transportation and Public Utilities  Wholesale Trade Agriculture Mining	
☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	
	e correspondence should be addressed
is changed to read:	
MOUNTAIN MIKE'S	PO BOX 1133 BONNERS F
8. Name and address for this acknowledgment copy is:	
MOUNTAIN MIKES	
PO BOX 1133	
BUNNERS Ferry 10 8	33805
Signature: Mi H KIVIC	Company of State was such
Printed Name: JULIE H KINK	Secretary of State use only
Capacity: OW NCV	
Signature:	
Printed Name:	IDAHO SECRETARY OF STATE
Capacity:	04/05/2013 05:00 CK: 11206 CT: 281582 BH: 1368209 1 0 18.00 = 10.00 ASSUM AMEN # 2