CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

ME 09 DEC 21 AM 9: 11

	09 DEC 21 AM 9:
To the SECRETARY OF STATE, STATE OF ID	AHO Idaho Code, the undersigned gives notice
or the action(s) indicated below:	STATE OF IDAHO
1. The assumed business name is: Ritals	5 Maternity
2. The assumed business name was filed with on 4/9/09 as file number D	the Secretary of State's Office
/ '	ne certificate no longer claim an interest in
the above assumed business name an	_
4. The assumed business name is amend	fed to:
5. The true names and business address business under the assumed business	· · · · · · · · · · · · · · · · · · ·
Add: Delete: Name:	Address:
6. The type of business is amended to re	ead: This is a grap part of the order eagengings of
Retail Trade	
☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	Finance, Insurance, and Real Estate Mining
	e correspondence should be addressed
is changed to read:	
8. Name and address for this acknowledgment	convis
Rita Ficher	
	Secretary of State use only
Pocatello, ID 83204	7
Signature: Pish Fisher	SOOS
Printed Name: Rita Eicher	Revised 04/2003
Capacity: owner	The state of the s
(see instruction # 9 on back of form)	18