

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

MAY 18 AM 9:40
SECRETARY OF STATE
STATE OF IDAHO

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice of the action(s) indicated below:

1. The assumed business name is: Crystal Clear Windows
2. The assumed business name was filed with the Secretary of State's Office on August 26, 2009 as file number D133108
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. ☐ The assumed business name is amended to: _____
5. ☒ The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:

<u>Add:</u>	<u>Delete:</u>	<u>Name:</u>	<u>Address:</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>KEITH R MILLER</u>	<u>1245 Holman Ave. Pocatello, ID 83201</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Idaho Carpet Care, LLC</u>	<u>1245 Holman Ave. Pocatello, ID 83201</u>
<input type="checkbox"/>	<input type="checkbox"/>	<u>(W 95888)</u>	_____

6. ☐ The type of business is amended to read:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining
7. ☐ The name and address to which future correspondence should be addressed is changed to read: _____

8. Name and address for this acknowledgment copy is:

Keith R Miller1245 Holman Ave.Pocatello, ID 83201

Signature: _____

Printed Name: Keith R MillerCapacity: Officer, President, owner

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

 IDAHO SECRETARY OF STATE
 05/18/2011 05:00
 CK: 1019 CT: 258942 BH: 1274254
 1 @ 10.00 = 10.00 ASSUM AMEN # 2

abn_amend.pmd Rev. 07/2010

D133108