CANCELLATION OR AMENDMENT THE DEFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly, Instructions are included on the back of the application 8 AM 8: 54

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, lo of the action(s) indicated below:	daho Code, the undersigned gives hotice
1. The assumed business name is: HM	FOAM
2. The assumed business name was filed with the Secretary of State's Office on $2/7 0 $ as file number $2/42463$.	
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 amende	ed to:
5. 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:
0 0	
6. The type of business is amended to read:	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction 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:	
Herman Massingale	
PO BOX 154	
Ferdinand, Td. 83526	Secretary of State use only
Signature: West	
Printed Name: Herman Massingale	
Capacity: Ower	
Signature:	
Printed Name:	
Capacity:	D42463

abn_amend.pmd Rev.07/2010