CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

2015 FEB 13 AM 10: 33

SECRETARY OF AT

(Please type or print legibly. Instructions are included on the	he back of the application: ICTARY UP STATE
1. The assumed business name is:	
2. The assumed business name was filed with on 2 as file number 2	the Secretary of State's Office
the above assumed business name and	· · · · · · · · · · · · · · · · · · ·
4. The assumed business name is amende	ed to: ONE EIGHIY
5. The true names and business addresse business under the assumed business	· · · · · · · · · · · · · · · · · · ·
Add: Delete: Name:	Address:
6. The type of business is amended to real Retail Trade Manufacturin Wholesale Trade Agriculture	g Transportation and Public Utilities Mining
☐ Services ☐ Construction	Finance, Insurance, and Real Estate
7. The name and address to which future is changed to read:	correspondence should be addressed
8. Name and address for this acknowledgment of STS. Grays LD. Nample, To. 83687	opy is:
Signature: Prob Jown	Secretary of State use only
Printed Name: Revecos John Sor	
Capacity: Dune	1DAHO SECRETARY OF STATE 02/13/2015 05:00
Signature:	CK:1687 CT:229794 BH:1461752
Printed Name: Capacity:	1@ 10.00 = 10.00 ASSUM AMEN #
Capacity.	· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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