CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, Id of the action(s) indicated below:	aho Code, the undersigned gives notice
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The assumed business name is: Stan Black's S	ales Office The Secretary of State's Office
onas the number	D61155
3. Cancellation. The persons who filed the certificate no longer claim an interest the above assumed business name and cancel the certificate in its entirety.	
4. The assumed business name is amende	ed to: Natural Living Solutions
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:
П П	
6. 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:	
Stanley Black, P.O. Box 473, Kamiah, ID	83536
8. Name and address for this acknowledgment copy is: Stanley Black P.O. Box 473	
P.O. BOX 473	Secretary of State use only
Kamiah, ID 83536	
Signature: Stanley J. Black Printed Name: Stanley J. Black	IDAHO SECRETARY OF STATE Co.70 ps/s/s/s/s/s/s/s/s/s/s/s/s/s/s/s/s/s/s/
<u> </u>	CK: 241 CT: 158019 BH: 745434 1 0 10.80 = 10.80 ASSUM AMEN # 2
(see instruction # 9 on back of form)	1 6 10.80 = 10.80 ASSUM AREN # 2
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