

CANCELLATION OR AMENDMENTFILED EFFECTIVE OF CERTIFICATE OF

2013 ACT -L AM Q: 12

ASSUMED BUSINESS NAME
(Please type or print legibly. Instructions are included on the back of the application.)
1. The assumed business name is: _ A_ Function STATE OF IDAHOH
2. The assumed business name was filed with the Secretary of State's Office on 6 28 2000 as file number 3 10 12
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:
Add: Delete: Name: Address:
6. The type of business is amended to read:
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Mining Services Construction Finance, Insurance, and Real Estate
7. The name and address to which future correspondence should be addressed
is crianged to read.
11049 Witzed Maple Dr. Boise, ID 83709
8. Name and address for this acknowledgment copy is:
Boise, 2001. 83709
Signature: The Consension of t
Printed Name: Rhoda Larsen
Capacity:
Signature:
Printed Name:
Capacity: