

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Ctonobeidan Lle	Cara	SECRETARY OF
 The assumed business name is: Stonebridge Ho 	ome Care	SECONIARY - 22
2. The assumed business name was filed with the on 12/18/2017 as file number D199020	Secretary of State's Office	STATE OF IDAHO
 Cancellation. The persons who filed the cert assumed business name and cancel the cer 	•	terest in the above
4. The assumed business name is amended to	i:	
5. The true names and business addresses of assumed business name are amended as fo		g business under the
Add: Delete: (Name) (Addres	ss)	
Add: Delete: (Name) (Addres	,	
Add: Delete: (Name) (Address	s)	
6. The type of business is amended to:	•	
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and FMiningFinance, Insurance,	
7. Amend mailing address for future correspondence to:	Name and address for copy is:	this acknowledgment
Capitol Healthcare, Inc. (Name) 5975 Overland Road (Address) Boise, ID 83709	(Name)	
(City) (State) (Zipcode)	(City)	(State) (Zipcode)
Printed Name: Elliot McMillan, Treasurer	Secretary of	State use only
Signature:		
Printed Name:		
Signature:	THAC	1020
Printed Name:		
Signature:		