



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

2013 JUN -3 PM 12: 54

SECRETARY OF STATE
STATE OF IDAHO

(Please type or print legibly. Instructions are included on the back of the application.)

1. The assumed business name is: 4172 N Cole LN
2. The assumed business name was filed with the Secretary of State's Office on 7/28/08 as file number D123628.
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:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Sammammar LLC</u>	<u>4761 N Rivervista Pl</u>
		<u>(W28258)</u>	<u>Boise ID 83714</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Samzak LLC</u>	<u>" " "</u>
		<u>(W92146)</u>	

6. ☐ The type of business is amended to read:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input checked="" type="checkbox"/> Finance, Insurance, and Real Estate
7. ☐ The name and address to which future correspondence should be addressed is changed to read:

4761 N Rivervista Pl Boise ID 83714

8. Name and address for this acknowledgment copy is:

Same as #7

Signature: _____

Printed Name: MARIANNE ZAKARIANCapacity: MEMBER

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
06/03/2013 05:00
CK: 1789 CT: 176514 BH: 1376414
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D123628