

228

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

 PH 12: 52  
 SECRETARY OF STATE  
 STATE OF IDAHO

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice of the action(s) indicated below:

1. The assumed business name is: IDAHO DENTAL AID
2. The assumed business name was filed with the Secretary of State's Office on 12/18/2009 as file number D127022.
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☐ Finance, Insurance, and Real Estate☐ Services☐ Construction☐ Mining

7. ☐ The name and address to which future correspondence should be addressed is changed to read:

8. Name and address for this acknowledgment copy is:

604 3RD ST SOUTHNAMPA ID 83651

Secretary of State use only

Signature: KIM B KELLERPrinted Name: KIM B KELLER DDS PACapacity: OWNER

(see instruction # 9 on back of form)

 s:\comp\m-ak\idaho\acknowledgment.pdf  
 Revised 04/2005

D127022