CANCELLATION OR AMENDMENTE OF EFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME Please type or print legibly. Instructions are included on the back of the application.)

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, to of the action(s) indicated below:	
The assumed business name is:	antage Dromotions
2. The assumed business name was filed with on 7/30/2011 as file number D471	
3. Cancellation. The persons who filed the the above assumed business name and	e certificate no longer claim an interest in cancel the certificate in its entirety.
4. The assumed business name is amende	ed 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 rea	ad:
Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	g Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
7. The name and address to which future correspondence should be addressed is changed to read:	
8. Name and address for this acknowledgment of Xie Wise	copy is:
Idalas Talle 18 82400	
	Secretary of State use only
Printed Name:	
	h 11-11-
Capacity:	Duni
Signature:	
Printed Name:	