Capacity:

CANCELLATION OR AMENDMENT **GEED EFFECTIV**CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. Instructions are included on the back of the application) SEP - 1 AM D.

To the SECRETARY OF STATE, STATE OF ID. Pursuant to Section 53-507 and 53-508, logical of the action(s) indicated below:	daho Code, the undersigned gives notice STAT
1. The assumed business name is: Water Resor	ırces Field Services
 The assumed business name was filed with on 21 February 2003 as file number D62705 	the Secretary of State's Office
3. Cancellation. The persons who filed the above assumed business name and	e certificate no longer claim an interest in discarded the certificate in its entirety.
4. The assumed business name is amend	ed to:
5. The true names and business address business under the assumed business	<u> </u>
Add: Delete: Name:	Address:
6. The type of business is amended to re	ad:
Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
7. The name and address to which future is changed to read:	e correspondence should be addressed
8. Name and address for this acknowledgment	copy is:
PO Box 94	
lona ID 83427	Secretary of State use only
Signature: Type C. Control	
Printed Name: Bryce A. Contor	*
Capacity: Owner	
Signature: Printed Name:	
Fuireu Maille.	