



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2014 FEB 21 AM 9:19

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

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name is: PERSPECTIVE RESTAURANT
2. The assumed business name was filed with the Secretary of State's Office on 8/5/2013 as file number D164903
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: CHEF SHANE'S PERSPECTIVE RESTAURANT
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>SHANE O'DELL (AS AN INDIVIDUAL)</u>	<u></u>
<input type="checkbox"/>	<input type="checkbox"/>	<u></u>	<u></u>
<input type="checkbox"/>	<input type="checkbox"/>	<u></u>	<u></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 type="checkbox"/> Finance, Insurance, and Real Estate

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

CHEF SHANE'S WELL SEASONED CATERING, LLC 1875 PEGGY'S LANE IDAHO FALLS ID

8. Name and address for this acknowledgment copy is: 83402

*Signature: *Shane O'Dell*

Printed Name: SHANE O'DELL

Capacity: OWNER/EXECUTIVE CHEF

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/21/2014 05:00
CX: 1476 CT: 206035 BH: 1411666
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D164903