

CANCELLATION OR AMENDMENT CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

FILED EFFECTIVE

06 DEC -1 PM 1:13

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:

STATE OF IDAHO

1. The assumed business name is: Fisher Lawn Care
2. The assumed business name was filed with the Secretary of State's Office on 2/27/2003 as file number D62939.
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: A Natural Choice
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 type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

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"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

9239 W. PANDION CT. BOISE ID 83714

8. Name and address for this acknowledgment copy is:

Secretary of State use only

Signature: _____

Printed Name: _____

Capacity: _____

(see instruction # 9 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
12/01/2006 05:00
CK: 14633 CT: 207000 BH: 1016870
1 @ 10.00 = 10.00 ASSUM AMEN # 2