

CANCELLATION, CONTINUATION, OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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:

FILED

1. The assumed business name is: Sweet Pea Lawn Care
2. The assumed business name was filed with the Secretary of State's Office on 2-24-97 as file number 01451
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. ☐ Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).
5. ☒ The assumed business name is amended to: Town & Country Lawn Care
6. ☐ 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>Don Rusher</u>	<u>1768 NW. 11th Meridian Id</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Leone Rusher</u>	<u>1768 NW. 11th Meridian, Id</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Jody Anthony</u>	<u>2085 Star Ln. Meridian, Id</u>
7. ☐ 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
8. ☒ The name and address to which future correspondence should be addressed is changed to read:

Town & Country Lawn Care 2085 Star Ln. Meridian, Id

9. Name and address for this acknowledgment copy is:

Dennis AnthonyJody Anthony2085 Star Ln. Meridian, Id
83642Signature: [Signature]Printed Name: Dennis J AnthonyCapacity: Owner

(see instruction # 4 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

01/03/2000 09:00
CX: 2069 CT: 124714 BH: 277905

1 @ 10.00 = 10.00 ASSUM AMEN # 2

g:\corp\forms\lab\ncdag.prm6 Revision 2/99