CANCELLATION OR AMENDMENT OF CERTIFICATE OF

2015 APR 13 AM 9: 33

ASSUMED BUSINESS NAME Please type or print legibly. Instructions are included on the back of the application.) 1. The assumed business name is: KJ'S PHARMACY (D127552) 2. The assumed business name was filed with the Secretary of State's Office on 01/15/2009 as file number <u>D127552</u> 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. The assumed business name is amended to: The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow: Name: Address: Add: Delete: 615 FILER AVE., TWIN FALLS, ID 83301 T2 APOTHECARY, LLC (W144747) 1 П KJ MEDICAL, INC. (C. 119165 615 FILER AVE., TWIN FALLS, ID 83301 \square П П The type of business is amended to read: √ Transportation and Public Utilities ✓ Retail Trade Manufacturing Mining Agriculture ☑ Wholesale Trade 📗 Finance, Insurance, and Real Estate √ Services Construction The name and address to which future correspondence should be addressed 7. **V** is changed to read: 615 FILER AVE., TWIN FALLS, ID 83301 8. Name and address for this acknowledgment copy is: KJ'S PHARMACY 615 FILER AVE. TWIN FALLS, ID 83301 Signature: Secretary of State use only Printed Name: TIMOTHY D. BROWN Capacity: MANAGING MEMBER IDAHO SECRETARY OF STATE Signature:_ 04/14/2015 05:00 Printed Name: THOMAS G WADSWORTH Capacity: MANAGING MEMBER

CK: 10519 CT: 308912 BH: 1470693 10.00 = 10.00 ASSUM AMEN #2

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