



# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

2013 OCT -2 PM 2: 07

SECRETARY OF STATE  
STATE OF IDAHO

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

1. The assumed business name is: PHILLIPPI HOUSE
2. The assumed business name was filed with the Secretary of State's Office on 12/5/00 as file number D 40997
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: \_\_\_\_\_
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>MARIANA LEAHU</u>	<u>703 S. PHILLIPPI ST BOISE 83705</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>GABRIELA MOLDOVAN</u>	<u>SAME</u>
<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"/> 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: \_\_\_\_\_

8. Name and address for this acknowledgment copy is:

GABRIELA MOLDOVAN  
703 S. PHILLIPPI ST  
BOISE ID 83705

Signature: [Signature]

Printed Name: MARIANA LEAHU

Capacity: \_\_\_\_\_

Signature: [Signature]

Printed Name: GABRIELA MOLDOVAN

Capacity: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/02/2013 05:00  
CK: CASH CT: 150010 BH: 1392499  
1 @ 10.00 = 10.00 ASSUM AMEN # 3

D40997