FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF
CERTIFICATE OF ASSUMED BUSINESS NAME
(Please type or print legibly)

2005 MAY -9 AM 10: 27

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:

1. The assumed business name is: Pedal Pushers Bike Rental and Repair

2. The assumed business name was filed with the Secretary of State's Office on ___01/22/01___ as file number ___D42028___ .

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:
☐	☑	John L. Kolbe II	P O Box 241 Harrison ID 83833
☑	☐	Bike North Idaho, Inc.	P O Box 241 Harrison ID 83833
☐	☐	C160216	

6. ☐ The type of business is amended to read:

☐ Retail Trade   ☐ Manufacturing   ☐ Transportation and Public Utilities
☐ Wholesale Trade   ☐ Agriculture   ☐ Finance, Insurance, and Real Estate
☐ Services   ☐ Construction   ☐ Mining

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:

Pedal Pushers Bike Rental and Repair

P O Box 241

Harrison, ID 83833

Signature: _John L. Kolbe II_

Printed Name: John L. Kolbe II

Capacity: President

(see instruction # 9 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
05/09/2005 05:00
CK: 10789 CT: 158010 BH: 809302
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D42028