

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

JAN 18 PM 2:17
SECRETARY OF STATE
STATE OF IDAHO

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: Fit4Life, Idaho Fitness Consulting
2. The assumed business name was filed with the Secretary of State's Office on 03/20/2008 as file number D120165.
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: Peter's Edge Training Center and Boot Camp Academy
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>John Caylor</u>	<u>210 Spencer St. Post Falls, ID, 83854</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Stephanie Hite</u>	<u>10387 Morris Rd Hayden ID 83835</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Stephanie Hite</u>	<u>10387 Morris Rd. Hayden ID 83835</u>

Change of address

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 checked="" 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:

10387 Morris Rd Hayden ID 83835

8. Name and address for this acknowledgment copy is:

John Caylor
10387 Morris Rd.
Hayden, ID 83835

Signature: [Signature]

Printed Name: John Caylor

Capacity: _____

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
06/18/2010 05:00
CX: 459651 CT: 172039 DH: 1227208
10 10.00 - 10.00 ASSUM AMEN #

D120165