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

(Please type or print leg	ibly) U6 MAY -8 AM 11: 04
To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, Id of the action(s) indicated below:	HO laho Code, the undersigned gives notice
1. The assumed business name is: Ship we	
2. The assumed business name was filed with to on ルラをつう as file number 上りて	he Secretary of State's Office
 Cancellation. The persons who filed the the above assumed business name and 	certificate no longer claim an interest in cancel the certificate in its entirety.
4. The assumed business name is amende	ed to:
5. The true names and business addresse business under the assumed business	es of the entity or individuals doing name are amended as follow:
Add: Delete: Name:	Address:
<u> </u>	
6. The type of business is amended to rea	ad:
Retail Trade	
7. The name and address to which future is changed to read:	correspondence should be addressed
Name and address for this acknowledgment of	copy is:
Patrick Irving	
412 Winter dr	Secretary of State use only
Doise, 10 63706	Ped d
signature:X Patul d	abnformstabnamend, Revised 04/2003
Printed Name: Patrick Wing	E &
	Revis
Capacity:	Complomstabniomstabnamend pmd Revised 04/2003