

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

OCT 14 PM 2:26

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: Valley Transmission
2. The assumed business name was filed with the Secretary of State's Office on 7/14/04 as file number D78188
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Sandra Livingston</u>	<u>3221 South melad 83680</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<u>Nampa, Id.</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"/> Finance, Insurance, and Real Estate
<input 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: _____

8. Name and address for this acknowledgment copy is:

Rick Costa
3221 south melad
Nampa, ID. 83686

Signature: Rick CostaPrinted Name: Rick Costa

Capacity: _____

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
 10/14/2004 05:00
 CK: CASH CT: 158010 BH: 771143
 1 @ 10.00 = 10.00 ASSUM AMEN # 2

 g:\coopl\forms\chform\abnamend.bmd
 Revised 04/2003