

FILED EFFECTIVE



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 APR -3 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name is: AA STORAGE
2. The assumed business name was filed with the Secretary of State's Office on 01/15/1999 as file number D22211.
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"/>	BILL BROOKS	(DECEASED)PO BOX 56, HAILEY ID 83333
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AILEEN BROOKS	(DECEASED)PO BOX 56, HAILEY ID 83333
<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:
PO BOX 981, HAILEY ID 83333-0981

8. Name and address for this acknowledgment copy is:

BETTY BROOKS

PO BOX 981

HAILEY ID, 83333-0981

Signature: Betty Brooks

Printed Name: BETTY BROOKS

Capacity: PARTNER/OWNER

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/03/2014 05:00
CK: 121 CT: 295191 BH: 1418492
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D 22211