



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2014 SEP 29 AM 9:17

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

 SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name is: Shae's Bloom's
2. The assumed business name was filed with the Secretary of State's Office on 03-05-2014 as file number D169426.
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:

<u>Add:</u>	<u>Delete:</u>	<u>Name:</u>	<u>Address:</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<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:
305 E. 25th St. Idaho Falls, ID ~~83400~~ 83404

8. Name and address for this acknowledgment copy is:

305 E. 25th St.
Idaho Falls, ID ~~83400~~ 83404

 Signature: Shae Wright

 Printed Name: Shae Wright

 Capacity: Owner

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

09/29/2014 05:00

CR:189 CT:293818 BH:1443213

1@ 10.00 = 10.00 ASSUM AMEN #2

D169426