CANCELLATION OR AMENDMENT FILED EFFECTIVE OF CERTIFICATE OF ASSUMED BUSINESS NAME 2014 AUG -6 AM 8: 32

(Please type or print legibly. Instructions are included on	the back of the application.)
1. The assumed business name is: The Lo	cker Room STATE OF TOAKO
2. The assumed business name was filed with on 7:19:2011 as file number D148	
3. Cancellation. The persons who filed the above assumed business name an	e certificate no longer claim an interest in d cancel the certificate in its entirety.
4. X The assumed business name is amend	led to: Stacis Hair and Nail Salon
5. The true names and business address business under the assumed business	· · · · · · · · · · · · · · · · · · ·
Add: Delete: Name:	Address:
O O	
a a	
6. The type of business is amended to re	ead:
☐ Retail Trade ☐ Manufacturii ☐ Wholesale Trade ☐ Agriculture	ng Transportation and Public Utilities
Services Construction	
 The name and address to which future is changed to read: 	e correspondence should be addressed
Staci Carter, 235 Polk S	St. E., Kimberly, 1D 83341
8. Name and address for this acknowledgment Staci Carter	copy is:
PO Box 3031	
Twin Falls, ID 83303	
Signature: SLA C	Secretary of State use only
Printed Name: Staci A. Cavtev	IDAHO SECRETARY OF STATE
Capacity: <u>OWNev</u>	08/06/2014 05:00
Signature:	CK:1070 CT:299812 BH:1436254 16 10.00 = 10.00 ASSUM AMEN #
Printed Name:	16 10.00 - 10.00 ASSUM AMEN #

abn_amend.pmd Rev. 07/2010

Capacity: