

CANCELLATION, CONTINUATION, OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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: THE MEDICINE WOMAN
2. The assumed business name was filed with the Secretary of State's Office on 5-9-98 as file number 014678
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. ☐ Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).
5. ☐ The assumed business name is amended to: _____
6. ☐ 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:
☐	☐	_____	_____
☐	☐	_____	_____
☐	☐	_____	_____

7. ☐ The type of business is amended to read:

☐ Retail Trade	☐ Manufacturing	☐ Transportation and Public Utilities
☐ Wholesale Trade	☐ Agriculture	☐ Finance, Insurance, and Real Estate
☐ Services	☐ Construction	☐ Mining
8. ☐ The name and address to which future correspondence should be addressed is changed to read: _____

9. Name and address for this acknowledgment copy is:

Barbara Barnett
1022 W Finch Dr
Nampa 83651

Signature: Barbara R. Barnett
 Printed Name: BARBARA R. BARNETT
 Capacity: PRESIDENT

(see instruction # 4 on back of form)

Secretary of State use only

STATE OF IDAHO

99 MAY -1 AM 8:58

FILED