

228

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: Timberwolf Resort
2. The assumed business name was filed with the Secretary of State's Office on Oct. 14, 1997 as file number D 8896
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: |
|--------------------------|--------------------------|-------|----------|
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |

7. ☐ 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 |

8. ☒ The name and address to which future correspondence should be addressed is changed to read:3781 Swan Valley Hwy. Palisades, ID 83428

9. Name and address for this acknowledgment copy is:

(Same as #8)

Signature: _____

Printed Name: Chris StonerCapacity: Owner

(see instruction # 10 on back of form)

Secretary of State use only

g:\corp\forms\assumedbusinessname\amendabn.pms
Revised 07/2002

IDAHO SECRETARY OF STATE
 09/27/2002 05:00
 CK: CASH CT: 158018 BH: 498452
 1 @ 10.00 = 10.00 ASSUM AMEN # 2

FILED/EFFECTIVE