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CANCELLATION OR AMENDMENT OF	
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(Please type or print legibly. Instructions are included on the back of the application.)	5
To the SECRETARY OF STATE, STATE OF IDAHO TO THE SECRETARY OF IDAHO TO THE SECRETARY OF STATE OF IDAHO TO THE SECRETARY OF I	te.
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:	
2. The assumed business name was filed with the Secretary of State's Office on 9/20/09 as file number 01/540/5	
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: SPARKLE SERVICES	
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:	_
DEVA BENNETT 999 N. Maple Grave Rd, Zob, BoisE 1/8	D 5370
AMANDA ROYERS 1958 W. Silver Falls CT, MERIDIAN 8	10 30111
AMANDA PAGE 1958 W. Silver falls CT, MERIDIA	,
6. 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	
7. The name and address to which future correspondence should be addressed	
is changed to read:	
1958 W. Silver Falls CT, MERIDIAN, 10 83646	
8. Name and address for this acknowledgment copy is:	
Secretary of State use only	
Signatura: Allanda Brown	
Printed Name: Amanda Regoes	
Capacity:	
Signature: IDAHO SECRETARY OF STATE 11/09/2012 05:00 CK: 1133146 CT: 172099 BH: 1347200	
Printed Name: 1 9 10.00 = 19.00 ASSUM ANEN # 2	
Capacity:	