

# 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: PACIFIC NORTHWEST WHOLESALE
2. The assumed business name was filed with the Secretary of State's Office on 09/02/1999 as file number D 28889.
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 checked="" type="checkbox"/> | <u>JaneLL D. Hildeman</u> | <u>42303 Hwy 200 HOPE ID. 83836</u> |
| <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 checked="" 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: \_\_\_\_\_
9. Name and address for this acknowledgment copy is: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Signature: JaneLL D. HildemanPrinted Name: JaneLL D. HildemanCapacity: OWNER

(see instruction # 10 on back of form)

Secretary of State use only

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