CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

(Flease type or pi	rint legibly) its DEC 23 PH 2:42
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-507 and 53-50 of the action(s) indicated below:	
The assumed business name is: Southrid	ge Dental
The assumed business name was filed work on11/22/2000 as file number	with the Secretary of State's Office
3. Cancellation. The persons who filed	d the certificate no longer claim an interest in and cancel the certificate in its entirety.
4. The assumed business name is ame	ended to:
Add: Delete: Name:	Address:
Robert Alan Pratt, DMD, P.C	2811 - 12th Avenue Rd., Nampa, ID 83686
6. The type of business is amended to Retail Trade Manufactu Molesale Trade Agriculture Construction 7. The name and address to which future is changed to read:	uring Transportation and Public Utilities Finance, Insurance, and Real Estate
Name and address for this acknowledgmen Robert Alan Pratt, DMD	nt copy is:
2811 - 12th Avenue Road	
Nampa, ID 83686	Secretary of State use only
Signature: And Jalan Tom	DAOO SECRETARY OF STATE 12/23/2004 05-00
Printed Name: Robert Alan Pratt, DMD	Revised Od 2003
Capacity: Pres., Robert Alan Pratt, DMD, P.C.	IDAHO SECRETARY OF STATE
(see instruction # 9 on back of form)	12/23/2004 05 = 00 CK: 39106 CT: 7289 BH: 783384 1 @ 10.00 = 10.00 ASSUM AMEN #