	228 FILED
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives vibice 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 <u>10410403</u> as file number <u>2041644</u> 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: 5. X 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:	(Please type or print legibly)
 The assumed pusiness name was filed with the Secretary of State's Office on IQUO as a file number 1001 as the certificate no longer claim an interest in the above assumed business name and cancel the certificate in its entirety. Cancellation. The persons who filed the certificate no longer claim an interest in the above assumed business name are cancel the certificate in its entirety. The true names and business name is amended to The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow: Address:	To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives hotice of the action(s) indicated below:
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I be assumed business name and cancel the certificate in its entirety. 4. The assumed business name is amended to: 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: Add: Delete: Name: Address: Add: Delete: Name: Address: 6. The type of business is amended to read: 8. The type of business is amended to read: 9. Wholesale Trade Agriculture Finance, Insurance, and Real Estate 9. Services Construction Mining 7. The name and address to which future correspondence should be addressed is changed to read: 8. Name and address for this acknowledgment copy is: 9. POX 31.51 9. State use only 9. State use o	on $10/10/03$ as file number $D/07/034^{-1}$.
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: Add: Delete: Name: Address: Add: Delete: Name: Address: Address: Address: Address: Address: Address: Address: B Accessed with State way of the transportation and Public Utilities B Monifesturing Transportation and Public Utilities B Wholesale Trade Agriculture Finance, Insurance, and Real Estate B Services Construction Mining 7. The name and address to which future correspondence should be addressed is changed to read: 8. Name and address for this acknowledgment copy is: Address Address Address Address B Address for this acknowledgment copy is: Address Address B Address for this acknowledgment copy is: Address Address Signature: Address Address Address B	
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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: 8. Name and address for this acknowledgment copy is: PODXBIN Secretary of State use only Signature: PODXBIN Printed Name: Image of form) (see instruction # 9 on back of form) Image of form)	D & Lacey W Schoppen, MOBEN 3151 Hugen 82
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: 8. Name and address for this acknowledgment copy is: PODXBIS Secretary of State use only Signature: PODXBIS Printed Name: INNO SECRETARY OF STATE (see instruction # 9 on back of form) INNO SECRETARY OF STATE	
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Signature: Secretary of State use only Printed Name: State use only Capacity: Capacity: (see instruction # 9 on back of form)	
Signature: Printed Name: (see instruction # 9 on back of form)	8. Name and address for this acknowledgment copy is:
Signature: Printed Name: (see instruction # 9 on back of form)	PO BOX 3151
CR. JIO CI: IJOBIE BH: /ICIIC	Hayden, ID83055
CR. JIO CI: IJOBIE BA: /IDIIC	Signature:
CR. JIO CI: IJOBIE BA: /IDIIC	Printed Name: CLLCCVVp
	Capacity: IDAHO SECRETARY OF STATE (see instruction # 9 on back of form) 12/11/2003 05 ±00 (see instruction # 9 on back of form) 18 18.89 = 10.06 ASSUN AMEN # 2