

# CANCELLATION 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: Event Supply Company

2. The assumed business name was filed with the Secretary of State's Office on January 7, 2005 as file number D 83231.

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. ☒ 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>On Sight, L.L.C.</u>	<u>3147 S. Shortleaf Ave., Boise, ID 83716</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>MAMG, L.L.C.</u>	<u>3147 S. Shortleaf Ave., Boise, ID 83716</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

6. ☐ 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

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:

Jonathan R. Bauer

960 Broadway Ave., Suite 500

Boise, ID 83706

Signature: 

Printed Name: Ryan Richard Eaton

Capacity: Member

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
01/26/2005 05:00  
CK: 26539 CT: 2618 BH: 789456  
1 @ 10.00 = 10.00 ASSUM AMEN # 3

g:\complaints\lab\forms\labamend.pmd  
Revised 04/2003

FILED-EFFECTIVE

JAN 26 PM 2:26

SECRETARY OF STATE  
STATE OF IDAHO