

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

2005 NOV 23 AM 9:42

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:

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name is: Green Thumb Designs
2. The assumed business name was filed with the Secretary of State's Office on 03/18/05 as file number D 85715
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 type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<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 checked="" type="checkbox"/> Construction	<input type="checkbox"/> Mining
7. ☒ The name and address to which future correspondence should be addressed is changed to read:
601 E. 18th Ave. Post Falls ID 83854

8. Name and address for this acknowledgment copy is:

Stacia Larson
1601 E. 18th Ave.
Post Falls, ID 83854

Secretary of State use only

Signature: Stacia L. Larson
 Printed Name: Stacia L. Larson
 Capacity: Owner

(see instruction # 9 on back of form)

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Revised 04/2003