

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

2004 MAY 13 A 11: 37

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: Take 5 on 10<sup>th</sup> Hair Design
2. The assumed business name was filed with the Secretary of State's Office on 10-2-03 as file number D 69482.
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>Nicole C. Lee</u>	<u>105 N. 10<sup>th</sup> St.</u>
<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 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:

Nicole C. Lee  
5001 W. Talamore Dr.  
Meredian, ID. 83642

Signature: Nicole C. Lee

Printed Name: Nicole C. Lee

Capacity: \_\_\_\_\_

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
 05/13/2004 05:00  
 CK: CASH CT: 150010 BH: 744054  
 1 @ 10.00 = 10.00 ASSUM AMEN # 2