## CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAMETIVE (Please type or print legibly)

2005 FEB 11 Att 9: 32
To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives motice of the action(s) indicated below:
1. The assumed business name is: Pine Brook Assisted hiving Central
2. The assumed business name was filed with the Secretary of State's Office.
3. Cancellation. The persons who filed the certificate no longer claim an interest in
The assumed business name is amended to: Two Back psiste history crotices
5. The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:  Name:  Address:
Add: Delete:
The type of business is amended to read:    Retail Trade
8. Name and address for this acknowledgment copy is:
Pine Brook Hospidad Living Central
4020 E 300 N =
1216BY 10 83442
Signature:
Printed Name: Row Hede /145  Printed Name: Row Hede /145  OK: 3934 CT: 150618 NH: 792668
Capacity: owner / Administrator

(see instruction # 9 on back of form)