## CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

	2004 SEP 21
of the action(s) indicated below:	Idaho Code, the undersigned gives notice
1. The assumed business name is:	nyside Dental Care
2. The assumed business name was filed with on 10-30-03 as file number	the Secretary of State's Office
<ol> <li>Cancellation. The persons who filed the above assumed business name ar</li> </ol>	ne certificate no longer claim an interest in and cancel the certificate in its entirety.
4. The assumed business name is amend	ded to:
5. The true names and business addres business under the assumed busines	s name are amended as follow:
Add: Delete: Name:	Address: 8
	<u> </u>
6. The type of business is amended to re	ead:
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
7. X The name and <u>address</u> to which future is changed to read:	e correspondence should be addressed
1520 Elk Creek	Drive Idaho Falls, ID
8. Name and address for this acknowledgment	V 2: //
Dunnyside Dental Care	
1500 Elk Creek Drive	
Tolaha Falls ID 834A4	Secretary of State use only
Signature: <u>Colette O Jorgensen</u> Printed Name: <u>Colette O Jorgensen</u>	IDAHO SECRETARY OF STATE  10/14/2004 05 = 00  CK: 1668 CT: 158810 BH: 771888  1 8 18.08 = 10.08 ASSUM AMEN # 2
Capacity: Office Manager	# 10.00 = 10.00 RSSUM RMEN # 2
(see instruction # 9 on back of form)	<b>8</b>