



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. Instructions are included on the back of the application.)

FILED EFFECTIV
2014 JUN -5 AM 8:49

SECRETARY OF STATE
STATE

1. The assumed business name is: Fiesta Pro Services
2. The assumed business name was filed with the Secretary of State's Office on 12/15/2011 as file number D151971.
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>Maria Lara</u>	<u>3210 N. Orchard St Boise, ID 83706</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Maria Lara</u>	<u>620 N. Orchard St Boise, ID 83706</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"/> Mining
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Finance, Insurance, and Real Estate
7. ☒ The name and address to which future correspondence should be addressed is changed to read:
620 N. Orchard St Boise, ID 83706
8. Name and address for this acknowledgment copy is:

Fiesta Pro Services
620 N. Orchard St
Boise, ID 83706
Maria Lara

Signature: _____

Printed Name: Maria Lara

Capacity: Owner

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/05/2014 05:00

CK:102 CT:271586 BH:1427872
1@ 10.00 = 10.00 ASSUM AMEN #2

D151971