



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2015 FEB -2 AM 9:26

SECRETARY OF STATE
STATE OF IDAHO

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

1. The assumed business name is: Back 2 Black Striping
2. The assumed business name was filed with the Secretary of State's Office on 31 Jul 2012 as file number D157215.
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:

| <u>Add:</u> | <u>Delete:</u> | <u>Name:</u> | <u>Address:</u> |
|--------------------------|--------------------------|--------------|-----------------|
| <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"/> 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:

8. Name and address for this acknowledgment copy is:

Lori Spivey
2381 W. Snyder St.
Meridian, ID 83642

Signature: _____
 Printed Name: Lori Spivey
 Capacity: Owner
 Signature: Lori Spivey
 Printed Name: _____
 Capacity: _____

Secretary of State use only

D157215