

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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: C.C.A.

2. The assumed business name was filed with the Secretary of State's Office on 4/14/00 as file number D35013.

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 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"/> 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:

Clearwater Chiropractic & Acupuncture, P.A., 3316 1/2  
Fourth Street, Suite 4A, Lewiston, Idaho 83501

8. Name and address for this acknowledgment copy is:

Charles A. Brown, Esq.

P.O. Box 1225

Lewiston, ID 83501

Signature: Dr. Susan J. Aubuchon

Printed Name: Dr. Susan J. Aubuchon

Capacity: President

(see instruction # 9 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
**09/23/2004 05:00**  
CK: 5958 CT: 25571 BH: 767656  
1 @ 10.00 = 10.00 ASSUM AMEN # 2

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Revised 04/2003