				ALLEN .
CANCEL CERTIFICATE	LATION OF E OF ASSU (Please type or pri	RAMENDI MED BUS	MENT OF INESS NAM	OZOCT 25 AM 8
To the SECRETARY OF STA Pursuant to Section 5 of the action(s) indicate	ATE, STATE OF 3-507 and 53-50	IDAHO		ATE OF OF
1. The assumed business r	name is: MARTINE	Z CONCRETE		·
2. The assumed business ron 8/31/2007 as f	name was filed w	ith the Secretar D114705	y of State's Offic	e
3. Cancellation. The parties above assumed 4. The assumed busin	business name	and cancel the	no longer claim a certificate in its e	n interest in entirety.
5. The true names an business under the	d business addre	esses of the en	ity or individuals mended as follov	doing v:
Add: Delete:	Name: RTO MARTINEZ		Addres	
RIGOBE	RIOMARINEZ	16664 N	GRAND PINE WA	Y NAMPA, 83651
6. The type of busines Retail Trade Wholesale Trade Services	Manufactu Agriculture Constructi	rring		nd Real Estate
The name and addischanged to read:	ress to which futu	re corresponde	ence should be a	ddressed
8. Name and address for this	s acknowledgmer	nt copy is:		
	•		Secretary of State u	se only
		THE COLUMN TWO IS NOT		
nature: Necales Inorbie:		2002 2003		
nted Name: NICOLAS MARTINEZ		a de la companya de l		
pacity: OWNER		P. P	_ IDAHO SECR	ETARY OF STATE
(see Instruction # 9 on back of	form)	Alcony	10/25/2 CK: 6843 CT: 1 1 8 10.00 = 1	

D114705