

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

RECEIVED
JAN 9: 05
SECRETARY OF STATE
STATE OF IDAHO

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: BRANSON FARMS
2. The assumed business name was filed with the Secretary of State's Office on 3/18/2004 as file number D74357.
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 checked="" type="checkbox"/>	<u>Robert D. Branson</u>	<u>2590 Branson Rd, Nezperce ID 83543</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Kathleen J. Branson</u>	<u>2590 Branson Rd, Nezperce ID 83543</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Greg R. Branson</u>	<u>2590 Branson Rd, Nezperce ID 83543</u>

*** SEE 2 PAGES ATTACHED
FOR OTHER MEMBERS ***

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: _____

8. Name and address for this acknowledgment copy is:

Greg R. Branson

2560 Branson Rd

Nezperce ID 83543

Secretary of State use only

Signature: 

Printed Name: Greg R. Branson

Capacity: President of Gregjen Corp., Partner

Signature: _____

Printed Name: _____

Capacity: _____

IDAHO SECRETARY OF STATE
02/23/2012 05:00
CK: NO CK # CT: 158810 BH: 1311833
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D74357

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

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: _____
2. The assumed business name was filed with the Secretary of State's Office on _____ as file number _____.
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 checked="" type="checkbox"/>	Jennifer A. Branson	2560 Branson Rd, Nezperce ID 83543
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gregjen Corp. (C193155)	2560 Branson Rd, Nezperce ID 83543
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bobkat Corp. (C193158)	2560 Branson Rd, Nezperce ID 83543

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: _____

8. Name and address for this acknowledgment copy is: _____

Signature: _____

Printed Name: _____

Capacity: _____

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/23/2012 05:00
CK: NO CK # CT: 158010 BH: 1311833
1 @ 10.00 = 10.00 ASSUM AMEN # 2

D74357

FILED EFFECTIVE

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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FILED 23 MAR 9:05
SECRETARY OF STATE
STATE OF IDAHO

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: _____
2. The assumed business name was filed with the Secretary of State's Office on _____ as file number _____.
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 checked="" type="checkbox"/>	<input type="checkbox"/>	Mitchell Creek, Inc. (C193156)	2560 Branson Rd, Nezperce ID 83543
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fourus, Inc. (C193157)	2560 Branson Rd, Nezperce ID 83543
<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: _____

8. Name and address for this acknowledgment copy is: _____

Signature: _____
 Printed Name: _____
 Capacity: _____
 Signature: _____
 Printed Name: _____
 Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
 02/23/2012 05:00
 CK: NO CK # CT: 150010 BH: 1311833
 1 @ 10.00 = 10.00 ASSUM ANEN # 2

D74357