FILED EFFECTIVE CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, Id of the action(s) indicated below:	2005 FEB 28 AM IO: HO aho Code, the undersigneds gwas optiga HO
The assumed business name is: Work-at-Home	
The assumed business name was filed with the on	ne Secretary of State's Office
 Cancellation. The persons who filed the the above assumed business name and 	certificate no longer claim an interest in cancel the certificate in its entirety.
4. The assumed business name is amended	· · · · · · · · · · · · · · · · · · ·
5. The true names and business addresses business under the assumed business n	s of the entity or individuals doing name are amended as follow:
Add: Delete: Name:	Address:
Mary Ann Bonesteel	10291 N Pinto Lane, Hayden, ID 83835
Forrest Dean Bonesteel	10291 N Pinto Lane, Hayden, ID 83835
6. The type of business is amended to read	
☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
7. The name and address to which future c is changed to read:	•
Name and address for this acknowledgment cop	py is:
Forrest Dean Bonesteel	
10291 N Pinto Lane, Hayden, ID 83835	
	Secretary of State use only
Signature Forest Den Bonestell 28	
Printed Name: Forrest Dean Bonesteel Capacity: Owner	
Capacity: Owner	
(see instruction # 9 on back of form)	