CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) (Please type or print legibly)

(i lease type of print legibly)	5 AIT 0. 35
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-507 and 53-508, Idaho Code, the under of the action(s) indicated below: 1. The assumed business name is:	RETARY OF STATE
2. The assumed business name was filed with the Secretary of State	e's Office
2. The assumed business name was filed with the Secretary of State on 500 25 200 as file number D118566	
3. Cancellation. The persons who filed the certificate no longer the above assumed business name and cancel the certificate	claim an interest in in its entirety.
4. The assumed business name is amended to:	
5. The true names and business addresses of the entity or indi-	
Add: Delete: Name:	Address:
Jacob Nelson Box 4605	Kelchum, 20 83340
1 Adam Swarn Box 882	WM ID 83333
1 the level / select the English Come	1 14
y record harry sees con	91572
6. The type of business is amended to read:	, , = , ===
	n and Public Utilities rance, and Real Estate
7. The name and address to which future correspondence sho is changed to read:	uld be addressed
9 None and address for this polynomial and a series	
8. Name and address for this acknowledgment copy is:	
Sacob Nelson	
40 Bax 4605	
Kelehin ID 83340	y of State use only
Signature:	
Printed Name: Sacob Nelson Capacity: Partner (see instruction # 9 on back of form)	
Capacity: Partner	
(see instruction # 9 on back of form)	