

CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

06 JAN -3 PM 1:45

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: The Idaho Citizens Coalition
2. The assumed business name was filed with the Secretary of State's Office on 10/3/01 as file number D 48804.
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 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:

Emilie Fothergill 4220 W. Wright St.

8. Name and address for this acknowledgment copy is: Boise, Id. 83709

Secretary of State use only

Signature: Emilie Fothergill

Printed Name: Emilie Fothergill

Capacity: President

(see instruction # 9 on back of form)

g:\corporate\lab\forms\lab\amend.jmd
Revised 04/2003

IDAHO SECRETARY OF STATE
01/03/2006 05:00
CK: 693066 CT: 172099 BH: 929846
1 @ 10.00 = 10.00 ASSUM AMEN # 3