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

| 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: |
| The assumed business name is: BLIND OBSESSION |
| 2. The assumed business name was filed with the Secretary of State's Office on 418200 as file number 054095 . |
| 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: |
| Add: Delete: Name: Address: |
| |
| |
| |
| 6. The type of business is amended to read: |
| Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services 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: DEBRA A. LAYMAN |
| 5164 BANNOCK HWY |
| Secretary of State use only |
| POCATELLO ID 83204-4506 |
| Signature: DEBRA A. LAYMAN Capacity: Owner (see instruction # 9 on back of form) |
| Printed Name: DEBRA A. LAYMAN |
| Capacity: Owner |
| (see instruction # 9 on back of form) |