



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

2015 JUN -1 AM 9:16

SECRETARY OF STATE STATE OF IDAHO

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

- 1. The assumed business name is: East Idaho Intervetional Pain Center
2. The assumed business name was filed with the Secretary of State's Office on 8/28/2009 as file number D133169
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. [x] The assumed business name is amended to: Teton Sports and Spine Pain Center
5. [ ] The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:

Table with 4 columns: Add, Delete, Name, Address. Contains three rows of checkboxes and blank lines for data entry.

- 6. [ ] The type of business is amended to read:
[ ] Retail Trade [ ] Manufacturing [ ] Transportation and Public Utilities
[ ] Wholesale Trade [ ] Agriculture [ ] Mining
[ ] Services [ ] Construction [ ] Finance, Insurance, and Real Estate
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:

Holly Zoe
2060 S Woodruff Ave
Idaho Falls, ID 83401

Signature: [Handwritten Signature]

Printed Name: Holly Zoe

Capacity: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE
06/01/2015 05:00
CR:16131 CT:249395 BH:1477902
1@ 10.00 = 10.00 ASSUM AMEN #2

D133169