

## **CANCELLATION OR AMENDMENT** OF CERTIFICATE OF **ASSUMED BUSINESS NAME**

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

| 2014 DEC 23 AM 8: 4:<br>SECULIA OF IDAMO   |  |  |
|--|--|--|
| e's Office                                 |  |  |
| claim an interest in<br>e in its entirety. |  |  |
| ividuals doing<br>as follow:               |  |  |
| Address:                                   |  |  |

| The assumed business name is: All American                                 | n food and Amusement  |
|--|---|
| 2. The assumed business name was filed with on Silving as file number      | the Secretary of State's Office   |
| 3. Cancellation. The persons who filed the above assumed business name and | ne certificate no longer claim an interest in and cancel the certificate in its entirety. |
| 4. The assumed business name is amend                                      | ded to: Stormy's  |
| 5. The true names and business address business under the assumed business |   |
| Add: Delete: Name:   | Address:  |
| wes Overlin  | 201 Hansen St East  |
| nd down 13   | Twin Falls ID 83301   |
|  |   |
| 6. The type of business is amended to re Retail Trade                      | ing Transportation and Public Utilities  Mining   |
|  | e correspondence should be addressed  |
| 8. Name and address for this acknowledgment Wes Overlin                    | copy is:  |
| 201 Hansen St East   |   |
| Twin Falls Id 83301  |   |
| Signature: WEJV/// 14/   | Secretary of State use only   |
| Printed Name: Wes Overlin  | IDAHO SECRETARY OF STATE  |
| Capacity:  | 12/23/2014 05:00  |
| Signature:   | CK:106454245238 CT:304435 BH:14<br>16 10:00 = 10:00 ASSUM AMEN                            |
| Printed Name:  |   |
| Capacity:  |   |

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