CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. Instructions are incl	uded on the back of the application.)
To the SECRETARY OF STATE, STATE OF IDAH Pursuant to Section 53-507 and 53-508, Ida of the action(s) indicated below:	ho Code, the undersigned gives notice
1. The assumed business name is: Weavers 0	irsel Persormance 3 Hoto Repair
2. The assumed business name was filed with the on 7/19/2007 as file number D 113L	e Secretary of State's Office
3. Cancellation. The persons who filed the of the above assumed business name and of	ancel the certificate in its entirety.
4. The assumed business name is amended	to: The Right Connection Arbentik
5. The true names and business addresses business under the assumed business na	of the entity or individuals doing
Add: Delete: Name:	Address:
6. The type of business is amended to read	:
Retail Trade Manufacturing Transportation and Public Utilities Molesale Trade Agriculture Finance, Insurance, and Real Estate Construction Mining	
7. The name and address to which future c	orrespondence should be addressed
is changed to read: James Weaver 4891 Lem	anual in Post Feills 83254
8. Name and address for this acknowledgment co	by is:
James Weaver 4891 Lemon wood Ln	
Post Fall, Id 83854 -	
	Secretary of State use only
Signature: A Lames	
Printed Name: Capacity:	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	07/21/2011 05:00 CK: 762 CT: 266568 BH: 1263356 1 0 10.00 = 10.00 ASSUM AMEN # 2
Capacity:	
abn smendpmd Rev 017/2010	D113416

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