

228

CANCELLATION, CONTINUATION, 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.

1. The assumed business name is: Olaverson Therapeutic Massage
2. The assumed business name was filed with the Secretary of State's Office on 4/19/99 as file number D25196
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. ☐ Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).
5. ☐ The assumed business name is amended to: _____
6. ☒ 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:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>John Olaverson</u>	<u>1840 E 1st St. Idaho Falls</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Olaverson Therapeutic Massage Inc.</u>	<u>966 Canyon Ave</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<u>Idaho Falls</u>

7. ☐ 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

8. ☐ The name and address to which future correspondence should be addressed is changed to read:

9. Name and address for this acknowledgment copy is:

John Olaverson
966 Canyon Ave
83402

Signature: [Signature]
Printed Name: John Olaverson
Capacity: _____

(see instruction # 4 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

12/05/2000 09:00
CK: 1089 CT: 139094 BH: 364549

1 @ 10.00 = 10.00 ASSUM AMEN # 2