

FILED EFFECTIVE

# 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

- 1 The assumed business name is THE MEDICAL OFFICE MANAGEMENT
- 2 The assumed business name was filed with the Secretary of State's Office company on ~~MAY~~ 8/12/2004 as file number D79108
- 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 THE OFFICE MANAGEMENT company
- 5 The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow

| And                      | Deleted                  | Name  | Address |
|--------------------------|--------------------------|-------|---------|
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____   |

- 6 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                              |

- 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

Antoinette Negrete  
16062 N. Pelican Butte Dr.  
Nampa, ID 83651

Secretary of State use only

Signature Antoinette Negrete  
 Printed Name Antoinette Negrete  
 Capacity owner

acknowledgment # \_\_\_\_\_

IDAHO SECRETARY OF STATE  
 07/05/2005 05:00  
 CK: 6496 CT: 158810 BH: 819362  
 1 @ 10.00 = 10.00 ASSUM AMEN # 2