FILED EFFECTIVE
08 MAY 27 AM 9:25
SECRETARY OF STATE
STATE OF IDAHO

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: Priest River Dental Care
2. The assumed business name was filed with the Secretary of State's Office on June 29, 2004 as file number D77751.
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: Mountain Lake Dental
5. ☑ 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:
☑	☐	Ty C. Corbridge DMD, PC	1323 Michigan St., Sandpoint, ID 83864
☐	☑	Ty C. Corbridge DMD, PC	P.O. Box 1347, Priest River, ID 83856
☐	☐		

6. ☐ The type of business is amended to read:

☐ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate
☐ Services ☐ Construction ☐ Mining

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

Ty C. Corbridge DMD, PC, 1323 Michigan St., Sandpoint, ID 83864

8. Name and address for this acknowledgment copy is:

Signature: [signature]

Printed Name: Sherry Corbridge

Capacity: Secretary

(see instruction # 9 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
05/27/2008 05:00
CK: 157 CT: 226365 BH: 1116842
1 @ 10.00 = 10.00 ASSUM AMEN # 2