## CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINES IN MUFFECTIVE (Please type or print legibly. Instructions are included on the back of the application.) 12 1111 - 4 111 9: 52

	1111 3 02
To the SECRETARY OF STATE, STATE OF ID. Pursuant to Section 53-507 and 53-508.	AHO SECRETARY OF STATION OF STATI
of the action(s) indicated below:	
1. The assumed business name is:	p Sight Bulders
2. The assumed business name was filed with on a specific pas file number	
3. Cancellation. The persons who filed the above assumed business name and	e certificate no longer claim an interest in decentificate in its entirety.
4. The assumed business name is amend	ed to:
5. The true names and business address business under the assumed business	· · · · · · · · · · · · · · · · · · ·
Add: Delete: Name:	Address:
<b></b>	<u> </u>
o o	
<u> </u>	
The true of hyperman is amounted to us	-d.
6. The type of business is amended to re	<b>-</b>
Retail Trade Manufacturii Wholesale Trade Agriculture	ng Transportation and Public Utilities  Finance, Insurance, and Real Estate
Services Construction	r—
7. The name and address to which future is changed to read:	e correspondence should be addressed
	· · · · · · · · · · · · · · · · · · ·
8. Name and address for this acknowledgment	copy is:
1380 W 3 20 I.	
OTIVE TOOKS	
	Secretary of State use only
Signature:	
Printed Name: 1500 homestage	
Capacity:	D22630
Signature:	D77020
Printed Name:	•
Capacity:	

abn\_amend.pmd Rev. 07/2010