CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

| (Please type or print leg | ibly) 12 AM 10: 31 |
|---|--|
| To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, Id of the action(s) indicated below: | HO STATE OF STATE HO STATE OF STATE STATE OF STATE STATE OF STATE STATE OF STATE STATE |
| The assumed business name is: Sandstone Event Center | |
| 2. The assumed business name was filed with t | be Secretary of State's Office D8640 |
| the above assumed business name and | e certificate no longer claim an interest in I cancel the certificate in its entirety. |
| | ed to: |
| 5. The true names and business address business under the assumed business | name are amended as follow. |
| Add: Delete: Name: | Address: |
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| Wholesale Trade Agriculture Services Construction | Transportation and Public Utilities Finance, Insurance, and Real Estate |
| 8. Name and address for this acknowledgment Kimbell D. Gourley | copy is: |
| P.O. Box 1097 | Secretary of State use only |
| Boise ID 83701 | D D |
| Signature: / \ S | mitemstaturend.pmd Revised 04/2003 |
| Printed Name: Michael Baker | Revised 04/2003 |
| Canacity: Owner | p)(bum) |

(see instruction # 9 on back of form)