## CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINES SUITE SUITE

(Please type or print legibly. Instructions are included on the back of the application.)

2012 NOV -1 PM 1: 21

	WILLIAM I III (. 7)
To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, Id of the action(s) indicated below:	laho Code, the undersign by gives hattoe
1. The assumed business name is:	ALLO OPULENCE
2. The assumed business name was filed with to on 2/24/2004 as file number 2734	
3. Cancellation. The persons who filed the the above assumed business name and	
4. The assumed business name is amende	d to:
5. The true names and business addresse business under the assumed business in	•
Add: Delete: Name:	Address:
	<u> </u>
O O	· · · · · · · · · · · · · · · · · · ·
6. The type of business is amended to rea	d:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities  Finance, Insurance, and Real Estate  Mining
7. The name and address to which future is changed to read:	correspondence should be addressed
8. Name and address for this acknowledgment con 1090 TEAKWOOD 83709	opy is:
TORGEL SIGNED IN	•
Signature: Jamy Say J	Secretary of State use only
Printed Name: SIGUER, JAMES L.In	
Capacity: OWNM	
Signature:	D13428
Printed Name:	W . U ! - U
Capacity:	

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