CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

(see instruction # 9 on back of form)

	-	SECO- 12:48			
Pursuant	ARY OF STATE, STATE OF IDA to Section 53-507 and 53-508, Id ion(s) indicated below:	HO STATE OF STATE aho Code, the undersigned gives notice			
1. The assume	d business name is: Outcast Sporti	ng Gear			
2. The assume on6/16	d business name was filed with the decirion of	ne Secretary of State's Office			
3. Cancel the abo	ation. The persons who filed the ve assumed business name and	certificate no longer claim an interest in cancel the certificate in its entirety.			
. —	sumed business name is amended	•			
5. V The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:					
Add: Del	ete: Name:	Address:			
	Outcast Sporting Gear LLC	3313 Brown Street Suite 1, Boise, Idaho 83714			
<b>?</b>	Argonaut Inflatable Research &	2021 E. Wilson Lane, Meridian, Idaho 83642			
	Engineering, Inc.				
6. The typ	pe of business is amended to read	<del>1</del> :			

	the above	assumed business name a	and cancel	the certificate in its entirety.
4.		ned business name is ame		
5. V	The true r	names and business addre	sses of the ss name ar	entity or individuals doing e amended as follow:
Ac	d: Delete:			Address:
		Outcast Sporting Gear LLC	331	3 Brown Street Suite 1, Boise, Idaho 83714
[v	<b>a</b> –	Argonaut Inflatable Research	& 202	1 E. Wilson Lane, Meridian, Idaho 83642
		Engineering, Inc.		
6.	The type of	of business is amended to	read:	
	☐ Retail T ☐ Wholes ☐ Service	ale Trade 🔲 Agriculture	F	ransportation and Public Utilities inance, Insurance, and Real Estate fining
7. 🗸	The name is changed	and address to which futuded to read:	re correspo	ondence should be addressed
	AIRE, A	attention: Alan Hamilton, 2021 E	. Wilson Lane	, Meridian, Idaho 83642
8. Nam	e and addre	ess for this acknowledgmen	t copy is:	
Trout	, Weeks & Ne	mec, PLLC		
Attn:	Steve Weeks			
P.O. I	Box 9695, Boi	se, Idaho 83707-3695	pwd	Secretary of State use only
Signature:	M	in Jamella	en en	
Printed Name	e: Alan Hami	ton	abriforms\aboundary	IDAHO SECRETARY OF STATE
Capacity: Sec	cretary/Treasu	rer	pyformska R	CK: 5848 CT: 158810 BH: 69591 1 0 10.00 = 10.00 occur office