

## CANCELLATION OR AMENDMENT FILED EFFECTIVE OF CERTIFICATE OF ASSUMED BUSINESS NAME

2017 JAN 18 PM 2: 19

SECRETARY OF STATE

|   | SIMIL  |
|---|--|
| 1. The assumed business name is:Clover  | s Towing   |
| 2. The assumed business name was filed with the Secretary of State's Office on 9-14-15 as file number DI 31 442.  |  |
| 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:   |  |
| <ol> <li>The true names and business addresses of the assumed business name are amended as follows:</li> </ol>  | ne entity or individuals doing business under the lows:  |
| Add: Delete: V Clovers Asset Recovers (Address)   | ory UC (W154856)   |
| Add: Delete: All City Towing & (Address)  | Recovery LLC POBOX 579, Stor 10. 8246  |
| Add: Delete: (Name) (Address)   |  |
| 6. The type of business is amended to:  |  |
| <ul><li>☐ Retail Trade</li><li>☐ Wholesale Trade</li><li>☐ Services</li><li>☐ Construction</li></ul>  | <ul><li>☑ Transportation and Public Utilities</li><li>☑ Mining</li><li>☑ Finance, Insurance, and Real Estate</li></ul> |
| 7. Amend mailing address for future correspondence to:  | Name and address for this acknowledgment copy is:  |
| PO BOX 579 7<br>Star 70 8369  | (Name) (Address) (City) (State) (Zipcode)  |
| Printed Name: Sarah Clover  |  |
|   | Secretary of State use only  |
| Signature: Sullou   | IDAHO SECRETARY OF STATE   |
| Printed Name:   | 01/18/2017 05:00<br>CK:1133 CT:333484 BH:1564531   |
| Signature:  | 16 10.00 = 10.00 ASSUM AMEN #3   |
| Printed Name:   | D181442  |
| Signatura:  |  |