



CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 NOV -6 PM 2:48
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name is: DTC GROUP
2. The assumed business name was filed with the Secretary of State's Office on 6-5-2013 as file number D163700
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: _____
5. ☒ The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:

<u>Add:</u>	<u>Delete:</u>	<u>Name:</u>	<u>Address:</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>VERVE LLC (W143953)</u>	<u>1737 N PEWTER AVE KUNA ID 83634</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

6. ☐ The type of business is amended to read:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Finance, Insurance, and Real Estate
7. ☐ The name and address to which future correspondence should be addressed is changed to read: _____

8. Name and address for this acknowledgment copy is:

DAVID CROSSETT

1737 N PEWTER AVE

KUNA, ID 83634

Signature: _____

Printed Name: DAVID CROSSETT

Capacity: OWNER

Signature: _____

Printed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/06/2014 05:00

CK:CASH CT:195088 BH:1448476
10 10.00 = 10.00 ASSUM AMEN #2

D163700