CANCELLATION OR AMENDMENE DEFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. Instructions are included on the back of the ability of th

To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, le of the action(s) indicated below:	daho Code, the undersigned gives notice
1. The assumed business name is:	and I
2. The assumed business name was filed with on <u>ou / ob/1999</u> as file number <u>D</u> 2	the Secretary of State's Office
3. Cancellation. The persons who filed the the above assumed business name and	e certificate no longer claim an interest in a cancel the certificate in its entirety.
4. The assumed business name is amende	ed to:
5. The true names and business address business under the assumed business	
Add: Delete: Name:	Address;
A Linda Cole	Mendian, ID 83646
	mendian, ID 83646
6. The type of business is amended to re Retail Trade Manufacturir Wholesale Trade Agriculture Services Construction 7. The name and address to which future	Transportation and Public Utilities Finance, Insurance, and Real Estate
is changed to read: 8. Name and address for this acknowledgment of	copy is:
	Secretary of State use only
ignature: Lature a Ruy	
Printed Name: Atvicia A . Ruyf	
Capacity: Co-owner	
Signature: Len da. Cole	IDAHO SECRETARY OF STATE
Printed Name: Luga Cole	07/12/2011 05:00 CK: 162 CT: 268569 BH: 1262847
Capacity: Co-owner	1 P 10.08 = 10.80 ASSUM AMEN # 2
abn_amend.pmd Rev. 67/2010	D 24783