CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

	11 DEC 13 PM 3: 45
To the SECRETARY OF STATE, STATE OF IDA Pursuant to Section 53-507 and 53-508, lo of the action(s) indicated below:	A =
1. The assumed business name is:	your o as
2. The assumed business name was filed with, on 1-20-9 Sas file number	the Secretary of State's Office
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 amende	ed to:
5. The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow: Add: Delete: (W101490) Name: Sales Address: NAMPO	
1 NA/CHATE	51800-ESCOA265A4
David Hor)	518 W. EDIONARDS AND HI
M Michellet Ha	7/ 11 10 1/8366
6. The type of business is amended to read:	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
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:	
Normpo ID 83686	
A Amon	Secretary of State use only
Signature:	
Printed Name: 27 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Capacity: 000000	_ IDAHO SECRETARY OF STATE
Signature: Printed Name:	12/15/2011 05:00 CK: CASH CT: 158810 BH: 1381950
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