

FILED/EFFECTIVE

228

CANCELLATION, CONTINUATION, OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives notice of the action(s) indicated below:

RECEIVED
STATE OF IDAHO
JUL 10 AM 8:54

- * 1. The assumed business name is: MEMPHY MARKS
- * 2. The assumed business name was filed with the Secretary of State's Office on 3/21/1997 as file number D2549
- 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. Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).
- 5. The assumed business name is amended to: _____

- * 6. The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:

Add:	Delete:	Name:	Address:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>JANICE & DOUGLAS B. WATSON</u>	<u>915 N MOONSTONE</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>GAIL PIERSON</u>	<u>905 Moonstone Idaho Falls ID 83401</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>JASON WATSON</u>	<u>915 N. MOONSTONE</u>

- 7. The type of business is amended to read:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

- * 8. The name and address to which future correspondence should be addressed is changed to read:

JASON D. WATSON 915 N. MOONSTONE IDAHO FALLS ID 83401

- * 9. Name and address for this acknowledgment copy is:

JASON WATSON
915 N. MOONSTONE

IDAHO FALLS, ID 83401

Signature: [Handwritten Signature]

Printed Name: JASON WATSON

Capacity: OWNER

(see instruction # 4 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

07/10/2000 09:00
CK: 85965721841 CT: 133327 BH: 332260

1 @ 10.00 = 10.00 ASSUM AMEN # 4

SECRETARY OF STATE