

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

07 AUG -9 AM 10:46

To the SECRETARY OF STATE, STATE OF IDAHO

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

1. The assumed business name is: IDAHO INSURANCE ASSOCIATES
2. The assumed business name was filed with the Secretary of State's Office  
on 2/26/02 as file number 052352.
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:

Add: Delete:

Name:

Address:

☐☐☐☐☐☐

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: IDAHO INSURANCE ASSOCIATES

202 N. 9TH ST. SUITE 401E BOISE, ID. 83702

8. Name and address for this acknowledgment copy is:

IDAHO INSURANCE ASSOCIATES202 N. 9TH ST. SUITE 401EBOISE, ID. 83702Signature: Curtis GoodnoePrinted Name: CURTIS GOODNOECapacity: OWNER

(see instruction # 9 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE

08/09/2007 05:00

CK: 3221 CT: 216306 BH: 1069885  
1 @ 10.00 = 10.00 ASSUM AMEN # 2