

# CANCELLATION OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 JUL 24 AM 8:45

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:

1. The assumed business name is: WarmArt Tattoos & Body Piercing
2. The assumed business name was filed with the Secretary of State's Office on 3/31/2010 as file number D34562.
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:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Rodney L Kinney Trust</u>	<u>224 West F, Jerome, Id 83338</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Rodney L Kinney</u>	<u>310 Quincey St. Twin Falls, Id 83334</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

6. ☐ 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 type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

7. ☐ The name and address to which future correspondence should be addressed is changed to read:

124 Main Ave. N, STE 203, Twin Falls, Id 83301

8. Name and address for this acknowledgment copy is:

~~224 West F, Jerome~~ Rodney L Kinney Trust.  
~~Jerome, Id~~ 224 West F,  
Jerome Id 83338

Signature: [Signature]  
 Printed Name: Rodney L Kinney  
 Capacity: Proprietor  
 Signature: [Signature]  
 Printed Name: \_\_\_\_\_  
 Capacity: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
 07/24/2014 05:00

CK:1123 CT:293127 BH:1434492  
 10 10.00 = 10.00 ASSUM AMEN #2

D34562