CANCELLATION OR AMENDMENTED FEFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

2007 MAR 16 AM 9: 04

To the SECRETARY OF STATE, STATE C Pursuant to Section 53-507 and 53- of the action(s) indicated below:	DF IDAHO 508, Idaho Code, the hindersigned gives notice
1. The assumed business name is: Lightho	ouse for Recovery
The assumed business name was filed on2/13/06 as file number	with the Secretary of State's Office
 Cancellation. The persons who fil the above assumed business name 	ed the certificate no longer claim an interest in ne and cancel the certificate in its entirety
4. The assumed business name is ar	mended to:
5. The true names and business adbusiness under the assumed bus	dresses of the entity or individuals doing iness name are amended as follow:
Add: Delete: Name:	Address:
6. The type of business is amended	to read:
Retail Trade Manufa Wholesale Trade Agricult Services Constru	ure Finance, Insurance, and Real Estate
7. The name and address to which to is changed to read:	future correspondence should be addressed
8. Name and address for this acknowledgn Willaim C. Slaven	nent copy is:
1517 Eastridge Dr. #57	
Pocatello, ID 83201	Secretary of State use only
Signature:	With a second form of the second
Printed Name: William C. Slaven	Revised 04/2003
Capacity: Oune -	Stoogstamstatrifomsta
(see instruction # 9 on back of form)	[6 6