



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

08 OCT 15 PM 1:15
SECRETARY OF STATE
STATE OF IDAHO

FILED
EFFECTIVE

1. The assumed business name which the undersigned use(s) in the transaction of business is:

REAM SUPPLY & BIKE STUDIO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
STEPHEN REAM	140 9TH AVE N
	TWIN FALLS, ID 83301

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future correspondence should be addressed:

REAM SUPPLY & BIKE STUDIO
140 9TH AVE N.
TWIN FALLS, ID 83301

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080
(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature: Stephen Ream

(signature required)

Printed Name: Stephen Ream

Capacity/Title: OWNER

(see Instruction # 8 on back of form)

Form 53 Assumed Business Name
Revised 04/2003

IDaho SECRETARY OF STATE
10/15/2008 05:00
CK: 1049 CT: 230581 BH: 1140183
1 @ 25.00 = 25.00 ASSUM NAME # 2

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