

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.



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

StreakerZ Auto Accessories

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

Name James D. Reed Complete Address P.O. Box 487 Kooskia, ID
83539

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<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 checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

StreakerZ
P.O. Box 487
Kooskia, ID 83539

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

X

Signature: James D Reed

Printed Name: James D. Reed

Capacity: ?? Owner

(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE
09/25/2002 05:00
CK: 5601 CT: 150010 BH: 490095
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 58555

FILED/EFFECTIVE