

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 OCT -4 PM 4:57

STATE OF IDAHO

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

	business is: WINWARD AD	VISORY G	ROUP	
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name CASTLEGUARD ADVISORY GROUP, LLC (W106767)	s) of the entity or individual(s) doing		
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	and Pub		
4.	The name and address to which future correspondence should be addressed: Paul Winward 8291 Locust Grove Meridian, ID 83642		Secretary of State 450 North 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):	nt	· · · · · · · · · · · · · · · · · · ·	
Ciana	ature: IDE		Secretary of State use only	
	ed Name: Paul Winward			
	city/Title: Member			
Signature:		IDAHO SECRETARY OF STATE 10/05/2011 05:00 CK: 881912 CT: 172899 BH: 1293836		
_	Printed Name:		1 @ 25.88 = 25.80 ASSUN MARE # 2	
	city/Title:			

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