



CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 DEC 17 AM 10:23

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

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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

Gerald Sword

PO Box 229 Sagle, ID 83860

Sandra Sword

PO Box 229 Sagle, ID 83860

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" 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:

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PO Box 229

Sagle, ID 83860

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):

Signature:

Sandra Sword
(signature required)

Printed Name:

Sandra Sword

Capacity/Title:

Co-owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corporate\form\labn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
12/17/2008 05:00
CK: 1289 CT: 232313 BH: 1148720
1 @ 25.00 = 25.00 ASSUM NAME # 2

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