



INSTRUMENT # 2017035958

FOR REGISTRATION REGISTER OF DEEDS
Stephanie A. Norman
Burke County, NC

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ASSUMED BUSINESS NAME CERTIFICATE (NCGS §66-71.5)

Please print legibly.

1. The assumed business name is: RED ACTION STRATAGIES

(You may include no more than five (5) assumed business names on this form.)

2. The real name of the person or entity engaging in business under the assumed business name is: JORDAN BOWMAN

(Corporations, LLC's, limited partnerships must provide the exact name registered with the NC Secretary of State's office and the SOSID number assigned at the time of formation. Go to www.sosnc.gov/br/search to look up your information.)

3. The nature/type of the business is: CONSULTING

4. The street address of the principal place of business is: (PO Boxes are not acceptable)
8842 SHEPHERD CT. CONNELLY SPRINGS NC 28612

5. The mailing address, if different from the street address, is:
PO BOX 364 MORGANTON, NC 28680

6. The counties where the assumed business name will be used to engage in business are:
 All 100 North Carolina counties

This certificate is signed by the owner/legal representative of the person or entity named above, this 30 day of DECEMBER, 2019.

Signature: Jordan W. Bowman

Printed/Typed Name: JORDAN W. BOWMAN

Title: SOLE PROPRIETOR

(See instructions for who must sign for various business entity types.)