

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

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

11 JUN -8 AM 9:13

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

SECRE BY OF STATE

2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
<u>Name</u> Linden Investment Services, LLC	Complete Address  5644 E Franklin Road
W 46759	Nampa, Idaho 83687
☐ Wholesale Trade ☐ Construct	tation and Public Utilities ction
<ul> <li>☐ Services</li> <li>☐ Manufacturing</li> <li>☐ Mining</li> <li>☑ Finance, Insurance, and Real Est</li> </ul>	Submit Certificate of Assumed Business
<ol> <li>The name and address to which future correspondence should be addressed:</li> <li>5644 E Franklin Road</li> </ol>	450 North 4th Street PO Box 83720
Nampa, Idaho 83687	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
nature: July 1	Secretary of State use only
nted Name: Richard E Hogg Dacity/Title: Owner / President	
nature:	
nted Name:	IDAHO SECRETARY OF STATE
pacity/Title:	06/08/2011 05=0 CK: 1590 CT: 248319 BH: 12774

abr.pmd Rev. 07/2010