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CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse. FILED	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned Y I 4 AM 8: 44 gives notice of adoption of an Assumed Business Name RETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of the transaction o	
business is: 	
 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 	
<u>Name</u>	Complete Address
Elledge Financial Services (C127491)	355 West AN yrtlo # 103
3. The general type of business transacted und (mark only those that apply)	ler the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	 Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
 The name and address to which future Ph correspondence should be addressed: 	one number (optional): <u>322-8131</u>
Investment lenter 1299 North Orchard Street	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Boise ID 83706	Secretary of State
5. Name and address for this acknowledgment copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
Elledge Financia (Services 355 West Myrtle #103	208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE
Signature: Thomas D Turns	Image Image <th< td=""></th<>
	$\frac{10}{5} = 20.00 = 20.00 \text{ ASSUM NAME # 2}$
Capacity: <u>Registered</u> Representative (see instruction # 8 on back of form)	D 25994
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