

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

11 OCT -4 AM 8: 24

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

 The assumed business name which the un business is: 	dersigned	use(s) in the transaction of
Elk Mountain Farm		
The true name(s) and business address(es business under the assumed business name).	s) of the e	ntity or individual(s) doing
Name Consolidated Farms, LLC	One Busch I	Complete Address Place, Attn: General Counsel
(W 18864)	St. Louis, M	O 63118
The general type of business transacted un	nder the a	ssumed business name is:
Retail Trade		Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 314-577-2000
		Secretary of State use only
Signature: (signature required) Printed Name: Thomas Larson Capacity/Title: Authorized Representative	g.tcorptorms/abn forms/abn.p65 Revised 04/2003	IDAHO SECRETARY OF STATE 10/04/2011 05:00 CK: 100372695 CT: 72910 BH: 1292933 1 8 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form) 402300.01		D 150516