



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

JUL 23 PM 12:41

SECRETARY OF STATE
STATE OF IDAHO

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

Eden Custom Farming

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

Gary T. Eden

414 N. 800 W. Shoshone, Idaho 83352

Glenna Eden

414 N. 800 W. Shoshone, Idaho 83352

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 type="checkbox"/> Services | <input checked="" 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:

414 N. 800 W.

Shoshone, Idaho 83352

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

12 E. Bullion Suite A

Hailey, Idaho 83333

Phone number (optional):

208-788-2130

Secretary of State use only

Signature: _____

(signature required)

Printed Name: Gary Eden or Glenna Eden

Capacity/Title: Owners

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
07/23/2007 05:00
CK: 9181856 CT: 158818 BH: 1066926
1 @ 25.00 = 25.00 ASSUM NAME # 2

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