9/21/2012



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 2014 JAN 21 AM 9: 58

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

Instructions are included on back of application.	SEQRETARY OF STATE
The assumed business name which the undersigned use(s) in the transaction of business is:	
Full Circle Farm	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name ERIKA Eschholz LLC Po (W124117) Orevious	Complete Address
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Erika Eschholz PO Box 116 Victor ID 83455	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above): Same	
Signature: Ma Jalaha	Secretary of State use only
Printed Name: ERIKA L. Eschholz	
Capacity/Title: Owner	
Signature:	IDAHO SECRETARY OF STATE 01/21/2014 05:00
Printed Name: Capacity/Title:	1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/ Fite	D 16 8 299

abn.pmd Rev. 07/2010