



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 OCT 26 AM 9:17

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

Thismoo's 4U Farm

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Harold K. Lambert 2972 Wood Canyon Rd. Soda Springs ID 83276
(Name) (Address) (City) (State) (Zipcode)

Yolonda Lambert 2972 Wood Canyon Rd. Soda Springs ID 83276
(Name) (Address) (City) (State) (Zipcode)

(Name) (Address) (City) (State) (Zipcode)

(Name) (Address) (City) (State) (Zipcode)

3. The general type of business transacted under the assumed business name is:

- | | | |
|--|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Construction | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

Thismoo's 4U Farm
(Name)
2972 Wood Canyon Rd.
(Address)
Soda Springs ID. 83276
(City) (State) (Zipcode)

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

(Name)
(Address)
(City) (State) (Zipcode)

Printed Name: Harold K. Lambert
Signature: Harold K. Lambert
Printed Name: Yolonda Lambert
Signature: Yolonda Lambert
Printed Name: _____
Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/27/2015 05:00

CK:135 CT:316094 BH:1497871

1@ 25.00 = 25.00 ASSUM NAME #2

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