

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

2012 JUL 25 AM 8: 47

SECRETARY OF STATE STATE OF IDAHO

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

1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	Thompson Cons	sulting Services
2.	The true name(s) and <u>business</u> address(es) business under the assumed business name Name Shamrock Meadows Farm & Orchard, LLC. (U) 114514)	
3.	The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Ider the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Shamrock Meadows Farm & Orchard c/o Wayne & Evelyn Thompson Viola, ID 83872 1205 Wellesley RW	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):	· · · · · · · · · · · · · · · · · · ·
	2.1.1	Secretary of State use only
	ture: Rihelly things	
Printe	ed Name: Richard Wayne Thompson	
Capa	city/Title: co-owner	IDAHO SECRETARY OF STATE
Signa	ture:	Ø7/25/2012 Ø5:00 CK: 6587 CT: 271076 BH: 1333363
Printe	ed Name:	1 8 25.08 = 25.00 ASSUM NAME # 2
Capa	city/Title:	TIETALA
	abn.pmd Rev.07/201	T) 157062