

No. W 66370	Due no later than Sep 30, 2011 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) GARY T HUBER 501 W AVE G JEROME ID 83338
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HUBER AG SERVICES, LLC PO BOX 545 JEROME ID 83338	3. <u>New</u> Registered Agent Signature.

4. **Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <u>Member</u> (circle one)						
	GARY HUBER	501 WEST AVE G	JEROME	ID	USA	83338
	MILKE HUBER	224 5TH AVE EAST	JEROME	ID	USA	83338

5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;">IDAHO W 66370</div>	6. <div style="margin-top: 10px;"> Signature: <div style="float: right;">Date: 10-20-11</div> </div> <div style="margin-top: 10px;"> Name (type or print): GARY HUBER <div style="float: right;">Title: MEMBER</div> </div>
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.