

No. W 125305	Due no later than May 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) BRET ADAMS 14020 N 175 E RIRIE ID 83443 36 South Overman Dr 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. ADAMS GRAIN BINS, LLC 14020 N 175 E RIRIE ID 83443 ADAMS GRAIN BINS LLC 36 South Overman Dr Jerome, ID 83338		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 15%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>BRETT ADAMS</td> <td>36 South Overman Dr</td> <td>Jerome, ID</td> <td>USA</td> <td></td> <td>83338</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>MIKE ADAMS</td> <td>13930 N 175 E</td> <td>RIRIE, ID</td> <td>USA</td> <td></td> <td>83338</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	BRETT ADAMS	36 South Overman Dr	Jerome, ID	USA		83338	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	MIKE ADAMS	13930 N 175 E	RIRIE, ID	USA		83338	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 125305	6. Signature: <u></u> Date: <u>3/17/14</u> Name (type or print): <u>BRETT ADAMS</u> Title: <u>Manager</u>																																					
Issued 03/13/2014 by DK1 124074																																						