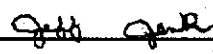



REINSTATEMENT

FILED EFFECTIVE

| No. W 9433 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00 | Annual Report Form ADMIN DISSOLVED 10/07/2008 1. Mailing Address - Correct in this box, if applicable ASHTON AG SUPPLY, LLC JEFF JENKINS PO BOX 577 ASHTON, ID 83420 | 2. Registered Agent and Office NOT A P.O. BOX JEFF JENKINS 3874 E 1300 N ASHTON, ID 83420 3. <u>New</u> registered agent signature  | | | | | | | | | | | | |
|--|---|--|-------------|-------|------------------------|------|-------|-----|----------------------|--------------|--------------|--------|----|-------|
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Reg. Agent Member</td> <td>Jeff Jenkins</td> <td>P.O. Box 577</td> <td>Ashton</td> <td>ID</td> <td>83420</td> </tr> </tbody> </table> | | | Office held | Name | Street or P.O. Address | City | State | Zip | Reg. Agent Member | Jeff Jenkins | P.O. Box 577 | Ashton | ID | 83420 |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | |
| Reg. Agent Member | Jeff Jenkins | P.O. Box 577 | Ashton | ID | 83420 | | | | | | | | | |
| 5. Organized under the laws of: IDAHO W 9433 | 6. Signature  Date <u>11-12-08</u> Name (Typed or Printed) <u>Jeff Jenkins</u> Title <u>Owner</u> | | | | | | | | | | | | | |

Issued 10/20/2008 by SL1