No. W 125305		Annual Report Form 1. Mailing Address: Correct in this box if needed. ADAMS GRAIN BINS, LLC 36 S OVERMAN DR JEROME ID 83338		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: ADAMS GRAIN BINS, LLC 36 S OVERMAN DR			BRETT ADAMS 36 S OVERMAN DR JEROME ID 83338 3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER BRETT	ADAMS 3	86 S OVERMAN DR	JERO	ME ID		83338	
5. Organized Under the Laws of:	6. Annual Report must be	nnual Report must be signed.*					
ID	ID Signature: Brett Adams			Date: 03/22/2016			
W 125305	W 125305 Name (type or print): Brett Adams			Title: Manager			
Processed 03/22/2016	* Electronically provided si	* Electronically provided signatures are accepted as original signatures.					