| No. <b>W 12644</b>                                                                 |           | Due no later than Aug 31, 2015                                                                                                                        |                                    | 2. Registe      | 2. Registered Agent and Address (NO PO BOX)                                                 |         |             |  |
|------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------|---------------------------------------------------------------------------------------------|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |           | Annual Report Form  1. Mailing Address: Correct in this box if needed.  AGRISERVICES, L.L.C.  MICHAEL N. DUFF  180 SOUTH 800 WEST  BLACKFOOT ID 83221 |                                    | 180 SC<br>BLACK | MICHAEL N DUFF  180 SOUTH 800 WEST  BLACKFOOT ID 83221  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar   |           | mes and Addresses                                                                                                                                     | of at least one Member or Manager. |                 |                                                                                             |         |             |  |
| Office Held                                                                        | Name      |                                                                                                                                                       | Street or PO Address               | City            | State                                                                                       | Country | Postal Code |  |
| MANAGER                                                                            | MICHAEL N | DUFF                                                                                                                                                  | 180 SOUTH 800 WEST                 | BLACKF(         | OOT ID                                                                                      |         | 83221       |  |
| 5. Organized Under the Laws of:  ID  W 12644                                       |           | 6. Annual Report must be signed.* Signature: Michael N. Duff Name (type or print): Michael N. Duff                                                    |                                    |                 | Date: 06/23/2015<br>Title: Manager                                                          |         |             |  |
| Processed 06/23/2015                                                               |           | * Electronically provided signatures are accepted as original signatures.                                                                             |                                    |                 |                                                                                             |         |             |  |