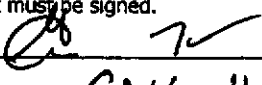


No. W 66370		Due no later than 9/30/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. HUBER AG SERVICES, LLC PO BOX 545 JEROME ID 83338		GARY T HUBER 501 W AVE G 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	Zip
MANAGER	GARY T HUBER	501 WEST AVE G	JEROME	ID	83338
MEMBER	MIKE T HUBER	224 5TH AVE EAST	JEROME	ID	83338
5. Organized Under the Laws of:		6. Annual Report must be signed.			
ID W 66370		Signature: 		Date: 10-7-09	
		Name(type or print): GARY HUBER		Title: manager-owner	