

|                                                                                                                                                        |                |                                                                                                                                                                                   |              |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 59093</b>                                                                                                                                     |                | <b>Due no later than Feb 29, 2012</b>                                                                                                                                             |              | 2. Registered Agent and Address <b>(NO PO BOX)</b>     |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BROWN DIRT FARMS, LLC<br>STEVE SAMOWITZ<br>814 S BROADWAY<br>BLACKFOOT ID 83221 |              | STEVE SAMOWITZ<br>814 S BROADWAY<br>BLACKFOOT ID 83221 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                   |              | 3. <u>New</u> 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                                                                                                                                                | STEVE SAMOWITZ | 814 S BROADWAY                                                                                                                                                                    | BLACKFOOT    | ID                                                     | USA     | 83221       |  |
| MANAGER                                                                                                                                                | MATHEW BROWN   | PO BOX 174                                                                                                                                                                        | SODA SPRINGS | ID                                                     | USA     | 83276       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 59093</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Steve Samowitz<br>Name (type or print): Steve Samowitz                                                                            |              |                                                        |         |             |  |
|                                                                                                                                                        |                | Date: 12/19/2011<br>Title: Member                                                                                                                                                 |              |                                                        |         |             |  |
| Processed 12/19/2011                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                         |              |                                                        |         |             |  |