State of South Dakota

OFFICE OF THE SECRETARY OF STATE

Certificate of Incorporation
Business Corporation

ORGANIZATIONAL ID #: DB044547

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of **AGSOURCE, INC.** duly signed and verified, pursuant to the provisions of the South Dakota Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY, and by virtue of the authority vested in me by law, I hereby issue this Certificate of Incorporation and attach hereto a duplicate of the Articles of Incorporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this September 19, 2001.

Joyce Hazeltine
Secretary of State

IncorpCertBusiness Merge.doc

K 0113

Filed this 19th day of Sept. 2001
Joyce Hazeltine
SECRETARY OF STATE

01103-00076
10/15/01 RECEIVED

SEP 19 '01

S.D. SEC. OF STATE

ARTICLES OF INCORPORATION
OF
AgSource, Inc.

KNOW ALL MEN BY THESE PRESENTS: That I, Allan Crow, for myself, associates and successors, have associated for the purpose of forming a corporation under and by virtue of the statutes and laws of the State of South Dakota, and I do hereby certify and declare as follows, to-wit:

FIRST: The name of this corporation shall be AgSource, Inc.

SECOND: The purpose for which this corporation is formed: To own, operate and maintain a seed and consulting business specifically designed to be profitable to this corporation and in conformity with the laws of the State of South Dakota;

To generally engage in, do and perform any enterprise, act or vocation that a natural person might or could do or perform in relation to the above seed and consulting business and all items in connection with such type of enterprise;

To purchase, improve, develop, exchange, sell, dispose of and otherwise deal in and turn to account all things that are involved in the operation of said type of enterprise; to purchase, lease, build, construct, erect, occupy and manage property necessary for the operation and development of this corporation; to finance, purchase, improve, develop and construct buildings belonging to or to be acquired by this corporation, and to do all things allowed within the statutes of the State of South Dakota.

The purposes specified herein shall be construed both as purposes and powers and shall be in nowise limited to or restricted by reference to or inference from the terms of any clause in this or any other article, but the purposes and powers specified in each of the clauses herein shall be regarded independent purposes and powers and the enumeration of specific purposes and

powers shall not be construed to limit or restrict in any manner the meaning of general terms or of the general powers of the corporation; nor shall the expression of one thing be deemed to exclude another, although it be of like nature not expressed.

THIRD: The principal place of business of the corporation shall be 55 Dakota Avenue North, Huron, South Dakota, and the registered office of this corporation shall be 55 Dakota Avenue North, Huron, South Dakota 57350. The name of the registered agent at such address shall be Allan Crow.

FOURTH: The term for which this corporation shall exist shall be perpetual.

FIFTH: The name and address of the incorporator is: Allan Crow, 55 Dakota Avenue North, Huron, South Dakota 57350.

SIXTH: The number of directors of this corporation shall not be less than one (1) nor more than seven (7), and the name and address of such, who is to serve until the election of his successor, shall be as follows:

Allan Crow	55 Dakota Avenue North Huron, South Dakota 57350

SEVENTH: The amount of capital stock of this corporation shall be Five Hundred Thousand Dollars ($500,000) divided into One Thousand (1,000) shares of Class A voting stock of par value of One Hundred Dollars ($100) each, fully paid and non-assessable and Four Thousand (4,000) shares of Class B nonvoting stock of par value of One Hundred Dollars ($100) each, fully paid and non-assessable. Each stockholder of Class A voting stock shall be entitled to one (1) vote for each share of stock owned by them.

EIGHTH: The corporation will not commence to do business in the State of South Dakota or any other place until the corporation has deposited in the corporate account a sum in at least the amount of One Thousand Dollars ($1,000) paid to the corporation for the issuance of

011031 000761
10/15/01

shares of stock of the corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand this 14th day of September, 2001.

Allan Crow

Allan Crow

I, Allan Crow, hereby consent to be the registered agent of this corporation known as AgSource, Inc.

Dated this 14th day of September, 2001.

Allan Crow

Allan Crow

STATE OF SOUTH DAKOTA)
:ss
COUNTY OF BEADLE)

Be it remembered, that on this 14th day of September, 2001, before me, the undersigned, personally appeared the above-named Allan Crow, well and personally known to me to be the same person described in and who executed the foregoing instrument and acknowledged to me that he executed the same.

In Witness Whereof, I have hereunto set my hand and seal and affixed my official seal at said County and State the day and year last above written.

Kristi Neuharth

Kristi Neuharth - Notary Public
My commission expires: August 20, 2005

(SEAL)

011031000761
10/15/01

Receipt Number: 1016127

File Number DB044547

ART OF INC

For

AGSOURCE, INC.

Filed at the request of:

CHURCHILL MANOLIS FREEMAN ET AL
KENT SHELTON
PO BOX 176
HURON SD 57350

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **Wednesday, September 19, 2001**

Secretary of State

Fee Received: $130 1,000 A VOT @ $100;
4,000 B NON-VOT 2 $100

State of South Dakota

OFFICE OF THE SECRETARY OF STATE

Certificate of Amendment

ORGANIZATIONAL ID #: DB044547

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that duplicate of the Articles of Amendment to the Articles of Incorporation of **AGSOURCE, INC.** duly signed and verified pursuant to the provisions of the South Dakota Corporation Acts, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issue this Certificate of Amendment to the Articles of Incorporation and attach hereto a duplicate of the Articles of Amendment.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this November 28, 2001.

Joyce Hazeltine

Joyce Hazeltine
Secretary of State

K
0
2
0

0201312.1410
1/4/02

RECEIVED
NOV 28 '01
S.D. SEC. OF STATE

RECEIVED
NOV 28 '01
S.D. SEC. of STATE

SECRETARY OF STATE

ARTICLES OF AMENDMENT TO CHANGE THE PAR VALUE OF STOCK OF AgSource, Inc. A SOUTH DAKOTA CORPORATION

I.

The par value of the corporation is $100.00 per share.

II.

The amendment so adopted by the stockholders of this corporation is as follows:

> "**BE IT RESOLVED** that the par value of this corporation be changed from $100.00 per share to $1.00 per share, and that the officers of the corporation are hereby empowered and directed to file in the office of the Secretary of State the necessary and requisite certificates and Articles of Amendment and such other necessary documents to effectuate the change of the par value of this corporation hereby authorized and effected." Therefore, there will now be Five Hundred Thousand Dollars ($500,000.00) divided into Five Hundred Thousand (500,000) shares of Class A voting stock of par value of One Dollar ($1.00) each, fully paid and nonassessable and Four Hundred Thousand Dollars ($400,000.00) divided into Four Hundred Thousand (400,000) shares of Class B nonvoting stock of par value of One Dollar ($1.00) each, fully paid and nonassessable. Each stockholder of Class A voting stock shall be entitled to one (1) vote for each share of stock owned by them.
>
> **IT IS FURTHER RESOLVED** that the current outstanding Class A voting stock shares shall be transferred to $1.00 per share stock so that the current stock holders will own the same value of stock but that the shares shall increase. In the case of Allan Crow his shares will increase to 500 shares of Class A voting stock and Helen Crow's shares will increase to 500 shares of Class A. voting stock at $1.00 per share."

III.

The date of the adoption of this amendment by the shareholders was September 29, 2001.

IV.

The number of outstanding shares of the corporation is 10 all of which are entitled to vote.

V.

The number of shares voted in favor of such amendment was 10 constituting the entire outstanding shares in favor such amendment, and there were no votes against the amendment.

db04547

IN TESTIMONY WHEREOF, we have hereunto set out hands this 19th day of November, 2001.

Allan Crow
Allan Crow

Helen Crow
Helen Crow

STATE OF SOUTH DAKOTA)
:ss
COUNTY OF BEADLE)

Allan Crow and Helen Crow, being first duly sworn, on oath deposes and says that they are the President/Treasurer and Vice President/Secretary of AgSource, Inc., the corporation desirous of changing the par value of its stock as herein set out; and that they have read the above and foregoing Articles of Amendment and that the same is true of their own personal knowledge, except as to those matters therein stated upon information and belief, and as to those they believe it to be true.

Allan Crow
Allan Crow

Helen Crow
Helen Crow

Subscribed and sworn to before me this 19th day of November, 2001.

Notary Public
My Commission expires: 6-27-2006

0201312

0201312.1410
1/4/02

Receipt Number: 1038335

File Number DB044547

ART OF AMENDMENT

For

AGSOURCE, INC.

Filed at the request of:

CHURCHILL MANOLIS FREEMAN ET AL
KENT SHELTON
PO BOX 176
HURON SD 57350

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: **Wednesday, November 28, 2001**

Joyce Hazeltine
Secretary of State

Fee Received: $20 am, $20 increase fee

K\002314.567

SECRETARY OF STATE

0020314.0567
3/20/02
RECEIVED
SD SEC. of STATE

ARTICLES OF CORRECTION
OF AgSource, Inc.
A SOUTH DAKOTA CORPORATION

I.

The par value of the corporation is $100.00 per share.

II.

The amendment so adopted by the stockholders of this corporation is as follows:

"**BE IT RESOLVED** that the par value of this corporation be changed from $100.00 per share to $1.00 per share, and that the officers of the corporation are hereby empowered and directed to file in the office of the Secretary of State the necessary and requisite certificates and Articles of Amendment and such other necessary documents to effectuate the change of the par value of this corporation hereby authorized and effected." Therefore, there will now be Five Hundred Thousand Dollars ($500,000.00) divided into One Hundred Thousand (100,000) shares of Class A voting stock of par value of One Dollar ($1.00) each, fully paid and nonassessable and Four Hundred Thousand Dollars ($400,000.00) divided into Four Hundred Thousand (400,000) shares of Class B nonvoting stock of par value of One Dollar ($1.00) each, fully paid and nonassessable. Each stockholder of Class A voting stock shall be entitled to one (1) vote for each share of stock owned by them.

IT IS FURTHER RESOLVED that the current outstanding Class A voting stock shares shall be transferred to $1.00 per share stock so that the current stock holders will own the same value of stock but that the shares shall increase. In the case of Allan Crow his shares will increase to 500 shares of Class A voting stock and Helen Crow's shares will increase to 500 shares of Class A. voting stock at $1.00 per share."

III.

The date of the adoption of this amendment by the shareholders was September 29, 2001.

IV.

The number of outstanding shares of the corporation is 10 all of which are entitled to vote.

V.

The number of shares voted in favor of such amendment was 10 constituting the entire outstanding shares in favor such amendment, and there were no votes against the amendment.

d/bor4547

0020314.0567
3/20/02

IN TESTIMONY WHEREOF, we have hereunto set out hands this 31st day of January, 2002.

Allan Crow
Allan Crow

Helen Crow
Helen Crow

STATE OF SOUTH DAKOTA)
:ss
COUNTY OF BEADLE)

Allan Crow and Helen Crow, being first duly sworn, on oath deposes and says that they are the President/Treasurer and Vice President/Secretary of AgSource, Inc., the corporation desirous of changing the par value of its stock as herein set out; and that they have read the above and foregoing Articles of Correction and that the same is true of their own personal knowledge, except as to those matters therein stated upon information and belief, and as to those they believe it to be true.

Allan Crow
Allan Crow

Helen Crow
Helen Crow

Subscribed and sworn to before me this 31st day of January, 2002.

Kristi Neubarth
Notary Public
My Commission expires: Aug. 21, 2005

3120102

State of South Dakota

OFFICE OF THE SECRETARY OF STATE

Certificate of Amendment

ORGANIZATIONAL ID #: DB044547

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that duplicate of the Articles of Amendment to the Articles of Incorporation of AGSOURCE, INC. duly signed and verified pursuant to the provisions of the South Dakota Corporation Acts, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issue this Certificate of Amendment to the Articles of Incorporation and attach hereto a duplicate of the Articles of Amendment.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this November 28, 2001.

Joyce Hazeltine
Secretary of State

Filed this 28th day of Nov., 2001
Joyce Hazeltine
SECRETARY OF STATE

ARTICLES OF AMENDMENT TO CHANGE THE PAR VALUE OF STOCK OF AgSource, Inc. A SOUTH DAKOTA CORPORATION

I.

The par value of the corporation is $100.00 per share.

II.

The amendment so adopted by the stockholders of this corporation is as follows:

"BE IT RESOLVED that the par value of this corporation be changed from $100.00 per share to $1.00 per share, and that the officers of the corporation are hereby empowered and directed to file in the office of the Secretary of State the necessary and requisite certificates and Articles of Amendment and such other necessary documents to effectuate the change of the par value of this corporation hereby authorized and effected." Therefore, there will now be Five Hundred Thousand Dollars ($500,000.00) divided into Five Hundred Thousand (500,000) shares of Class A voting stock of par value of One Dollar ($1.00) each, fully paid and nonassessable and Four Hundred Thousand Dollars ($400,000.00) divided into Four Hundred Thousand (400,000) shares of Class B nonvoting stock of par value of One Dollar ($1.00) each, fully paid and nonassessable. Each stockholder of Class A voting stock shall be entitled to one (1) vote for each share of stock owned by them.

IT IS FURTHER RESOLVED that the current outstanding Class A voting stock shares shall be transferred to $1.00 per share stock so that the current stock holders will own the same value of stock but that the shares shall increase. In the case of Allan Crow his shares will increase to 500 shares of Class A voting stock and Helen Crow's shares will increase to 500 shares of Class A. voting stock at $1.00 per share."

III.

The date of the adoption of this amendment by the shareholders was September 29, 2001.

IV.

The number of outstanding shares of the corporation is 10 all of which are entitled to vote.

V.

The number of shares voted in favor of such amendment was 10 constituting the entire outstanding shares in favor such amendment, and there were no votes against the amendment.

0020314.0567
3/20/02

IN TESTIMONY WHEREOF, we have hereunto set out hands this 19th day of November, 2001.

Allan Crow
Allan Crow

Helen Crow
Helen Crow

STATE OF SOUTH DAKOTA)
:ss
COUNTY OF BEADLE)

Allan Crow and Helen Crow, being first duly sworn, on oath deposes and says that they are the President/Treasurer and Vice President/Secretary of AgSource, Inc., the corporation desirous of changing the par value of its stock as herein set out; and that they have read the above and foregoing Articles of Amendment and that the same is true of their own personal knowledge, except as to those matters therein stated upon information and belief, and as to those they believe it to be true.

Allan Crow
Allan Crow

Helen Crow
Helen Crow

Subscribed and sworn to before me this 19th day of November, 2001.

Lori Anderson
Notary Public
My Commission expires: 6-27-2006

0020314

0020314.0567
3/20/02

Receipt Number: 1044934

File Number DB044547

ART OF CORRECTION MS

For

AGSOURCE, INC.

Filed at the request of:

CHURCHILL MANOLIS FREEMAN ET AL
KENT SHELTON
PO BOX 176
HURON SD 57350

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: February 11, 2002

Joyce Hazeltine
Secretary of State

Fee Received $20

2002 ANNUAL REPORT

0210216.3344
10/9/02

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILE DATE 9-23-02
RECEIPT NO. 1139927

RECEIVED SEP 06 '02 S.D. SEC. OF STATE

FILING FEE: $25 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $50 APPLIES TO ALL LATE FILINGS

1. Corporate Name, Registered Agent and Registered Address:

DB SEP/0000
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # 605-353-7146
FAX # 605 353-9561
Federal Taxpayer ID #
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

RECEIVED SEP 23 '02 S.D. SEC. OF STATE

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

☒ ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

★ ★

2. The character of the business in which it is actually engaged in South Dakota A Seed And Consulting Business

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
Allan Crow	President	5287 Dakota Ave S	Huron	SD	57350-6547
Helen Crow	Vice President	5287 Dakota Ave S	Huron	SD	57350-6547
Helen Crow	Secretary	5287 Dakota Ave S	Huron	SD	57350-6547
Allan Crow	Treasurer	5287 Dakota Ave S	Huron	SD	57350-6547

SD law requires at least one director.
Do the above listed officers serve also as directors? YES ✓ NO ___ If no, list directors below.

_______________ Director _______________

_______________ Director _______________

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized)	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
100,000 / 400,000	3		$1. $100,000.00 / $400,000.00

5. NUMBER OF SHARES ACTUALLY ISSUED 1,000 CLASS SERIES

6. The amount of its stated capital is $ 1,000.00 (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated September 5 2002

By Helen Crow
(Signature)

Its Secretary
(Title)

STATE OF SD
COUNTY OF Beadle ss

On this the 5th day of September, 2002 before me, Verna DeKraai personally appeared Helen Crow, known to me, or proved to me, to be the Secretary of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 7-27-2004

Verna DeKraai
Notary Public

(Notarial Seal)

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845 FAX (605) 773-4550
www.state.sd.us/sos/sos.htm

SOS CRP 11/01

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date _____
Receipt No. _____

FILING FEE: $10 in addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____
2. The previous street address, or a statement that there is no street address, of its registered office _____
   _____ ZIP + 4 _____
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____
   _____ ZIP + 4 _____
4. The name of its previous registered agent is _____
5. The name of its successor registered agent is * _____

   *The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated _____ _____
(Signature)

_____
(Title)

STATE OF _____ ss
COUNTY OF _____

On this the ____ day of _____, 20____, before me, _____ personally appeared _____, known to me, or proved to me, to be the _____ of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

My Commission Expires _____ _____
Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)
Dated _____ _____
(signature)

223 1600 10/21/2003

2003 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $50 APPLIES TO ALL LATE FILINGS

FILE DATE 9-5-03
RECEIPT NO. 1294631

1. Corporate Name, Registered Agent and Registered Address:

DB-044547
DB-044547 SEP/2002
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # (605) 353-9546
FAX # (605) 353-9561
Federal Taxpa

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may **check** the **box** below and sign the report below in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

☒ ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

★ ★

2. The character of the business in which it is actually engaged in South Dakota ____________________

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
	President				
	Vice President				
	Secretary				
	Treasurer				

SD law requires at least one director.
Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

	Director	
	Director	

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is $ ____________________. (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer in the presence of a notary public.

Dated September 2, 2003 By Helen Crow (Signature)

Its Secretary (Title)

STATE OF South Dakota
COUNTY OF Davison ss

On this the 2nd day of September, 2003, before me, James D. Laird personally appeared Helen Crow, known to me, or proved to me, to be the Secretary of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 10-15-04

[signature] Notary Public

(Notarial Seal)

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.state.sd.us/sos

SOS CRP 07/03

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date _____
Receipt No. _____

FILING FEE: $10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____
2. The previous street address, or a statement that there is no street address, of its registered office _____
   _____ ZIP + 4 _____
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____
   _____ ZIP + 4 _____
4. The name of its previous registered agent is _____
5. The name of its successor registered agent is * _____
   *The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated _____ _____
(Signature)

_____
(Title)

STATE OF _____ ss
COUNTY OF _____

On this the ____ day of _____,20____, before me, _____ personally appeared _____, known to me, or proved to me, to be the _____ of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

My Commission Expires _____ _____
Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ _____
(signature)

230 3053 09/20/2004

2004 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $50 APPLIES TO ALL LATE FILINGS

FILE DATE 09/13/04
RECEIPT NO. 1358341

RECEIVED
SEP 13 '04
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB044547

DB044547 SEP/2003
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # (605) 353-9546
FAX # (605) 353-9561
Federal Taxpa

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may **check** the **box** below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. **Any change requires full completion of the front side of this form.**

☒ ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

★ ★

2. The character of the business in which it is actually engaged in South Dakota ______

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
	President				
	Vice President				
	Secretary				
	Treasurer				

SD law requires at least one director.
Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

______ Director ______

______ Director ______

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is $______ . (Money received for issued shares)

The report must be signed by the chairman of the board of directors, its president, or any other officer.

Dated September 9, 2004

Helen Crow
(Signature)

Secretary
(Title)

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/04

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date _____
Receipt No. _____

FILING FEE: $10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The previous street address, or a statement that there is no street address, of its registered office _____

   _____ ZIP + 4 _____

3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____

   _____ ZIP + 4 _____

4. The name of its previous registered agent is _____

5. The name of its successor registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or any other officer.

Dated _____ _____
(Signature)

_____
(Title)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____ ,hereby give my consent to serve as the
(name of registered agent)

registered agent for _____
(corporate name)

Dated _____ _____
(signature)

Revised 07/04

242 1097 10/21/2005

2005 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE

RECEIVED OCT ... '05 S.D. SEC. OF STATE

FILE DATE 10/19/05
RECEIPT NO. ________
RECEIVED SEP 30 '05 S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Registered Address:

DB044547
DB044547 SEP/2004
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # (605) 353-9546
FAX # (605) 353-9561

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. **Any change requires full completion of the front side of this form.**

☒ ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

★ ★

2. The address of the principal office Same As prior report - 55 Dakota Ave N Huron SD 57350

3. The names and business addresses of its directors and principal officers: Same As prior report

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
Allan Crow	President	5287 Dakota Ave S	Huron	SD	57350
Helen Crow	Vice President	5287 Dakota Ave S	Huron	SD	57350
Helen Crow	Secretary	5287 Dakota Ave S	Huron	SD	57350
Allan Crow	Treasurer	5287 Dakota Ave S	Huron	SD	57350

4. Provide a brief description of the nature of the business Same As prior report - Livestock Production Management Consulting

SD law requires at least one director.
Do the above listed officers serve also as directors? YES ✓ NO ___ If no, list directors below.

________ Director ________

________ Director ________

5. The total number of authorized shares, itemized by class and series, if any, within each class:

NUMBER OF AUTHORIZED SHARES	CLASS	SERIES
100,000	A	
400,000	B	

6. NUMBER OF ISSUED AND OUTSTANDING SHARES Outstanding CLASS SERIES

	CLASS	SERIES
1,000 Issued 99,000	A	
400,000 Outstanding	B	

The statement may be signed by any authorized officer of the Corporation.

Dated September 22, 2005

Helen Crow
Signature

Helen Crow
Printed Name

Secretary
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date _____
Receipt No. _____

FILING FEE: $10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Business Corporation Act, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The street address, or a statement that there is no street address, of its current registered office _____

   _____ ZIP + 4 _____

3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. _____

   _____ ZIP + 4 _____

4. The name of its current registered agent is _____

5. The name of its new registered agent is *_____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

The statement may be signed by any authorized officer of the corporation.

Dated _____

_____
Signature

_____
Printed Name

_____
Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____ ,hereby give my consent to serve as the
(name of registered agent)

registered agent for_____
(corporate name)

Dated _____

_____
(signature)

254 0046 10/05/2006

2006 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK
FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE

FILE DATE 09/26/06
RECEIPT NO. 594637

RECEIVED
SEP 26 '06
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Registered Address:

DB044547
DB044547 SEP/2005
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # (605) 353-9546
FAX # (605) 353-9561

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may **check** the **box** below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. **Any change requires full completion of the front side of this form.**

☒ ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

★ ★

2. The address of the principal office ______________________

3. The names and business addresses of its directors and principal officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
	President				
	Vice President				
	Secretary				
	Treasurer				

SD law requires at least one director.
Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

______________ Director ______________
______________ Director ______________

4. Provide a brief description of the nature of the business ______________________

5. The total number of authorized shares, itemized by class and series, if any, within each class:

NUMBER OF AUTHORIZED SHARES CLASS SERIES

6. NUMBER OF ISSUED SHARES CLASS SERIES

The statement may be signed by any authorized officer of the Corporation.

Dated September 22, 2006

Helen Crow
Signature

Helen Crow
Printed Name

Secretary
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date _____
Receipt No. _____

FILING FEE: $10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Business Corporation Act, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The street address, or a statement that there is no street address, of its current registered office _____

   _____ ZIP + 4 _____

3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. _____

   _____ ZIP + 4 _____

4. The name of its current registered agent is _____

5. The name of its new registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

The statement may be signed by any authorized officer of the corporation.

Dated _____

_____
Signature

_____
Printed Name

_____
Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____ ,hereby give my consent to serve as the
(name of registered agent)

registered agent for _____
(corporate name)

Dated _____

_____
(signature)

267 3139 10/18/2007

2007 ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: $30 MAKE CHECK PAYABLE TO SECRETARY OF STATE

FILE DATE 10-1-07
RECEIPT NO. 1721084

RECEIVED
OCT 01 2007
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Registered Address:

DB044547
DB044547 SEP/2006
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # (605) 353-9546
FAX # (605) 353-9561

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may **check** the **box** below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. **Any change requires full completion of the front side of this form.**

☒ ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

★ ★

2. The address of the principal office ____________________

3. The names and business addresses of its directors and principal officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
	President				
	Vice President				
	Secretary				
	Treasurer				

SD law requires at least one director.
Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

____________________ Director ____________________

____________________ Director ____________________

4. Provide a brief description of the nature of the business ____________________

5. The total number of authorized shares, itemized by class and series, if any, within each class:

NUMBER OF AUTHORIZED SHARES CLASS SERIES

6. NUMBER OF ISSUED SHARES CLASS SERIES

The statement may be signed by any authorized officer of the Corporation.

Dated September 28, 2007

Helen Crow
Signature

Helen Crow
Printed Name

Secretary
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date _____
Receipt No. _____

FILING FEE: $10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Business Corporation Act, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The street address, or a statement that there is no street address, of its current registered office _____

   _____ ZIP + 4 _____

3. The new address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. _____

   _____ ZIP + 4 _____

4. The name of its current registered agent is _____

5. The name of its new registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

The statement may be signed by any authorized officer of the corporation.

Dated _____

_____
Signature

_____
Printed Name

_____
Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____ ,hereby give my consent to serve as the
(name of registered agent)

registered agent for _____
(corporate name)

Dated _____

_____
(signature)

281 3514 10/27/2008

2008 ANNUAL REPORT
DOMESTIC

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

Please Type or Print Clearly in Ink

FILING FEE: $30 Make check payable to SECRETARY OF STATE

FILE DATE 10/10/08
RECEIPT NO 1842524
RECEIVED OCT 10 2008 S.D. SEC. OF STATE
RECEIVED SEP 30 2008 S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:

DB044547
DB044547 SEP/2007
AGSOURCE, INC.
CROW, ALLAN
55 DAKOTA AVENUE NORTH
HURON SD 57350-1558

Telephone # (605) 353-9546
FAX # (605) 353-9561

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

2. The address of the principal executive office in or out of the State of South Dakota.

Street Address	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
PO Box 1435	Huron	SD	57350-1435
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent Allan Crow

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
PO Box 1435	Huron	SD	57350-1435
Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

	Street Address	City	State	ZIP+4
☑ Allan Crow, President	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Helen Crow, Vice President	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Helen Crow, Secretary	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Allan Crow, Treasurer	5287 Dakota Ave S	Huron	SD	57350-6547
☐ Director				
☐ Director				

Dated September 29, 2008

Helen Crow
(Signature of an authorized officer)

Helen Crow
(Printed Name)

Secretary
(Title)

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: $10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity Ag Source Inc

2. The name of the registered agent on file Allan Crow

   The name of the successor registered agent —

3. If listing a Commercial Registered Agent, please state their identification number: —

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
Mailing Address (Optional)	City	State	ZIP+4

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 1435	Huron	SD	57350-1435

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

Dated 10/9/08

Helen Crow
(Signature of an authorized officer)

Helen Crow
(Printed Name)

Secretary
(Title)

2009 ANNUAL REPORT
DOMESTIC

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

Please Type or Print Clearly in Ink

FILING FEE: $50 Make check payable to SECRETARY OF STATE

FILE DATE 09/03/09
RECEIPT NO 194643
RECEIVED
SEP 03 2009
S.D. SEC. OF STATE

295 2682

1. Corporate Name, Registered Agent Name and Address:

DB044547

DB044547 SEP/2008
AGSOURCE, INC.
CROW, ALLAN
PO BOX 1435
HURON SD 57350-1435

Telephone # _____
FAX # _____
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

2. The address of the principal executive office in or out of the State of South Dakota.

Street Address	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
Mailing Address (Optional)	City	State	ZIP+4
PO Box 1435	Huron	SD	57350-1435

3. The name of the South Dakota Registered Agent Allan Crow

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 1435	Huron	SD	57350-1435

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

	Street Address	City	State	ZIP+4
☑ Allan Crow, President	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Helen Crow, Vice President	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Helen Crow, Secretary	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Allan Crow, Treasurer	5287 Dakota Ave S	Huron	SD	57350-6547
☐ Director				
☐ Director				

Dated September 2, 2009

Helen Crow
(Signature of an authorized officer)

Helen Crow
(Printed Name)

Secretary
(Title)

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: $10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

_____

2. The name of the registered agent on file _____

   The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number: _____

4. The address of the agent currently on file for this entity

_____
Street Address (Required) | City | State | ZIP+4

_____
Mailing Address (Optional) | City | State | ZIP+4

5. If the address has changed, its new address

_____
Street Address (Required to be a South Dakota Address) | City | State | ZIP+4

_____
Mailing Address (Optional – Required to be a South Dakota Address) | City | State | ZIP+4

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

Dated _____

_____
(Signature of an authorized officer)

_____
(Printed Name)

_____
(Title)

2010 ANNUAL REPORT
DOMESTIC

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

Please Type or Print Clearly in Ink

FILING FEE: $50 Make check payable to SECRETARY OF STATE

FILE DATE 9/30/10
RECEIPT NO 20726664
RECEIVED
SEP 30 2010
S.D. SEC. OF STATE

311 1196

1. Corporate Name, Registered Agent Name and Address:

DB0445547
DB044547 SEP/2009
AGSOURCE, INC.
CROW, ALLAN
PO BOX 1435
HURON SD 57350-1435

Telephone # _____
FAX # _____
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

2. The jurisdiction under whose law it is formed South Dakota

3. The address of the principal executive office in or out of the State of South Dakota

Street Address	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
Mailing Address (Optional)	City	State	ZIP+4
PO Box 1435	Huron	SD	57350-1435

4. The name of the South Dakota Registered Agent Allan Crow

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
55 Dakota Ave N	Huron	SD	57350-1558
Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 1435	Huron	SD	57350-1435

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

	Street Address	City	State	ZIP+4
☑ Allan Crow (President)	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Helen Crow (Vice President)	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Helen Crow (Secretary)	5287 Dakota Ave S	Huron	SD	57350-6547
☑ Allan Crow (Treasurer)	5287 Dakota Ave S	Huron	SD	57350-6547
☐ Director				
☐ Director				

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated September 29, 2010

Helen Crow
(Signature of an Authorized Person)

Helen Crow
(Printed Name)

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: $10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

_____

2. The name of the registered agent on file _____

   The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number _____

4. The address of the agent currently on file for this entity

_____
Street Address (Required) City State ZIP+4

_____
Mailing Address (Optional) City State ZIP+4

5. If the address has changed, its new address

_____
Street Address (Required to be a South Dakota Address) City State ZIP+4

_____
Mailing Address (Optional – Required to be a South Dakota Address) City State ZIP+4

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated _____

_____
(Signature of an Authorized Person)

_____
(Printed Name)

2011 Enter Filing Year

ANNUAL REPORT

FILE DATE 09/21/2011

RECEIPT NO 2345

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC

Please Type or Print Clearly In Ink

FILING FEE: $50.00 Make check payable to SECRETARY OF STATE

1. Corporate ID and Name:
DB044547
AGSOURCE, INC.
55 DAKOTA AVE N
HURON, SD57350-1558

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

55 DAKOTA AVE N	HURON	SD	57350-1558
Street Address	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ALLAN CROW

55 DAKOTA AVENUE NORTH	HURON	SD	57350-1558
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	President	Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Vice President	Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Treasurer	Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Dated 09/21/2011

Signature Accepted Electronically
(Signature of an Authorized Person)

HELEN CROW
(Printed Name)

9/21/2011 1:28:37PM

2012 Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC

Please Type or Print Clearly In Ink

FILING FEE: $50.00 Make check payable to SECRETARY OF STATE

FILE 9/9/2012

RECEIPT NO 62704

1. Corporate ID and Name:
DB044547
AGSOURCE, INC.
55 DAKOTA AVE N
HURON, SD 57350-1558

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

Street Address	City	State	ZIP+4
55 DAKOTA AVE N	HURON	SD	57350-1558
PO BOX 1435	HURON	SD	57350-1435
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ALLAN CROW

Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
55 DAKOTA AVENUE NORTH	HURON	SD	57350-1558
PO BOX 1435	HURON	SD	57350-1435
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	President	Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Vice President	Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Treasurer	Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 09/09/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

HELEN CROW

(Printed Name)

9/9/2012 8:06:51 PM

2013 Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC

Please Type or Print Clearly In Ink

FILING FEE: $50.00 Make check payable to SECRETARY OF STATE

FILE 9/15/2013
RECEIPT NO 140470

1. Corporate ID and Name:
DB044547
AGSOURCE, INC.
55 DAKOTA AVE N
HURON, SD 57350-1558

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

55 DAKOTA AVE N	HURON	SD	57350-1558
Street Address	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ALLAN CROW

55 DAKOTA AVENUE NORTH	HURON	SD	57350-1558
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

[X]	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	President	Street Address	City	State	ZIP+4
[X]	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Vice President	Street Address	City	State	ZIP+4
[X]	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Secretary	Street Address	City	State	ZIP+4
[X]	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Treasurer	Street Address	City	State	ZIP+4
[ ]					
	Director	Street Address	City	State	ZIP+4
[ ]					
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 09/15/2013

Signature Accepted Electronically
(Signature of an Authorized Person)
HELEN CROW
(Printed Name)

9/15/2013 9:18:58 PM

2014 Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC

Please Type or Print Clearly In Ink

FILING FEE: $50.00 Make check payable to SECRETARY OF STATE

FILE DATE 9/1/2014
RECEIPT NO 228174

1. Corporate ID and Name:
DB044547
AGSOURCE, INC.
55 DAKOTA AVE N
HURON, SD 57350-1558

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

Street Address	City	State	ZIP+4
55 DAKOTA AVE N	HURON	SD	57350-1558
PO BOX 1435	HURON	SD	57350-1435
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ALLAN CROW

Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
55 DAKOTA AVENUE NORTH	HURON	SD	57350-1558
PO BOX 1435	HURON	SD	57350-1435
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

		Street Address	City	State	ZIP+4
X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	President				
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Vice President				
	Director				
	Director				
X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Treasurer				
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Secretary				

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Dated 09/01/2014

Signature Accepted Electronically
(Signature of an Authorized Person)

HELEN CROW
(Printed Name)

9/1/2014 11:00:07 PM

2015

Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC

SDCL 47-27-18, 59-11-24

Please Type or Print Clearly In Ink

FILING FEE: $50.00 Make check payable to SECRETARY OF STATE

FILE DATE 9/7/2015

RECEIPT NO 333805

Telephone #

1. Corporate ID and Name:

DB044547

AGSOURCE, INC.

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

55 DAKOTA AVE N	HURON	SD	57350-1558
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address, if Different from Street Address	City	State	ZIP+4

Email Address (Optional)

4. The name of the South Dakota Registered Agent

Agent Name: ALLAN CROW

55 DAKOTA AVENUE NORTH	HURON	SD	57350-1558
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

Email Address (Optional)

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	President	Actual Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Vice President	Actual Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Secretary	Actual Street Address	City	State	ZIP+4
X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Treasurer	Actual Street Address	City	State	ZIP+4

Director	Actual Street Address	City	State	ZIP+4

Director	Actual Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.

Dated 09/07/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

Email

(Optional)

HELEN CROW

(Printed Name)

*By signing this form you agree to have both the fee and the form processed electronically.
A fee of up to $40 will be assessed for returned payments.

9/7/2015 11:53:52 PM

2016

Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC CORPORATION

SDCL 59-11-24, 24.1

Please Type or Print Clearly In Ink

FILING FEE: $50.00 Make check payable to SECRETARY OF STATE

FILE DATE 9/21/2016

RECEIPT NO 457253

1. Corporate ID and Name:

DB044547
Enter Corporate ID

AGSOURCE, INC.
Enter Corporate Name

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

55 DAKOTA AVE N	HURON	SD	57350-1558
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address, if Different from Street Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ALLAN CROW

55 DAKOTA AVENUE NORTH	HURON	SD	57350-1558
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 1435	HURON	SD	57350-1435
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and business addresses of its principal officers and directors (governors). If, pursuant to SDCL 47-1A-732(1), the board of directors has been eliminated, list the names of the shareholders.

X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	President	Actual Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Vice President	Actual Street Address	City	State	ZIP+4
X	HELEN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Secretary	Actual Street Address	City	State	ZIP+4
X	ALLAN CROW	5287 DAKOTA AVE S	HURON	SD	57350
	Treasurer	Actual Street Address	City	State	ZIP+4
	Director	Actual Street Address	City	State	ZIP+4

Director	Actual Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty (SDCL 47-1A-129).

Dated 09/21/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

HELEN CROW

(Printed Name)

*By signing this form you agree to have both the fee and the form processed electronically.
A fee of up to $40 will be assessed for returned payments.

9/21/2016 7:17:54 AM