



**ROVING GRAIN BUYER'S BOND  
PUBLIC SERVICE COMMISSION  
SFN 52019 (05-99)**

**BOND NO:** S 0100521

Name <b>HEARTLAND MILL INC dba HMI SOURCING</b>			
Address <b>RR 1 BOX 2</b>	City <b>MARIENTHAL</b>	State <b>KS</b>	Zip Code <b>67863</b>

Name <b>MICHIGAN MILLERS MUTUAL INSURANCE COMPANY</b>			
Address <b>2425 E GRAND RIVER AVENUE</b>	City <b>LANSING</b>	State <b>MI</b>	Zip Code <b>48912</b>

We, the above named **PRINCIPAL** and **SURETY** are bound to the State of North Dakota in the penal sum of **SEVENTY THOUSAND & NO/100 DOLLARS (\$70,000.00)** for the use and benefit of all persons selling grain to or through the **PRINCIPAL**. The payment of the penal sum shall bind ourselves, our heirs, legal representatives, successors, and assigns, jointly and severally.

The **PRINCIPAL** has made application to the North Dakota Public Service Commission (Commission), to be licensed as a "Roving Grain Buyer", entitled to do business as such any place within the State of North Dakota.

The condition of this obligation is as follows: If the **PRINCIPAL** shall (1) faithfully perform all duties as a roving grain buyer, (2) comply with the provisions of law and the rules of the Commission applicable to the business of a roving grain buyer, and (3) pay for all grain purchased or marketed and all sums for which the **PRINCIPAL** shall become liable to persons dealing with the **PRINCIPAL** or his agent or agents within the State of North Dakota from loss or damage by reason of any violation of law or rules applicable to the business of a roving grain buyer, then this obligation shall be void, otherwise it shall remain in effect, provided, however, that this surety bond shall not accrue to the benefit of any person entering into a credit-sale contract with the **PRINCIPAL**.

Liability for this undertaking commences on August 01, 2008, and shall be continuous unless the **SURETY** by certified mail notifies the **PRINCIPAL** and the Commission that the surety bond has been canceled. The cancellation notice shall state that the surety bond will be canceled ninety (90) days after the receipt of the cancellation notice or on a later date specified by the **SURETY**. In no event shall the aggregate liability of the **SURETY** accumulate for each successive annual license renewal period during which the bond is in force but, for losses during any annual license renewal period, shall be limited in the aggregate to the bond amount stated or changed by appropriate endorsement or rider.

The liability of the **SURETY** for any violation of the obligations hereof by the **PRINCIPAL** during the period of time the bond remains in effect, shall remain in force thereafter for such period of time as may be permitted under the laws of the State of North Dakota.

This bond, including definitions of the terms used herein, are governed by the provisions of Chapter 60-02.1 of the North Dakota Century Code.

Countersigned by North Dakota Resident Agent: Name/Signature:			
Address	City	<b>ND</b>	Zip Code

**THIS SECTION TO BE COMPLETED BY PRINCIPAL**

**ACKNOWLEDGMENT OF PRINCIPAL**

State of Kansas )  
County of Wichita )  
On this 26<sup>th</sup> day of August, 2008,  
before me personally appeared Larry Decker  
known to me to be the person or said corporation described in and who executed the within instrument as **PRINCIPAL** and acknowledged to me that he/she or said corporation executed the same.

Larry Decker  
Signature of Principal

Noreen Walk  
Notary Public

My Commission expires 04-19-2009  
NOTARY PUBLIC - State of Kansas  
**NOREEN WALK**  
My Appt. Expires 04-19-2009

**THIS SECTION TO BE COMPLETED BY SURETY**

**ACKNOWLEDGMENT OF SURETY**  
(Corporate Officer)

State of Michigan ) **SEE**  
County of Ingham ) **ATTACHED**  
On this 1st day of August, 2008,  
before me personally appeared Lloyd Stickler  
known to me to be Attorney-in-Fact  
of said corporation that is described in and that executed the within instrument as **SURETY**, and acknowledged to me that such corporation executed the same.

Lloyd G Stickler, Bond Manager  
Name and Title of Person Signing for Surety

Lloyd G Stickler  
Signature

Carla M Peek  
Notary Public

My Commission expires 01/10/12  
**CARLA M. PEEK**  
Notary Public, State of Michigan, County of Ingham  
My Commission Expires January 10, 2012  
Acting in the County of Ingham

North Dakota Public Service Commission  
600 E Boulevard Ave Dept 408  
Bismarck, ND 58505-0480  
Telephone 701-328-4097  
Fax 701-328-2410

**ATTORNEY-IN-FACT MUST ATTACH VALID POWER OF ATTORNEY FROM SURETY.**

POWER OF ATTORNEY  
MICHIGAN MILLERS MUTUAL INSURANCE COMPANY  
LANSING, MICHIGAN

KNOW ALL MEN BY THESE PRESENTS:

That the MICHIGAN MILLERS MUTUAL INSURANCE COMPANY, in pursuance of authority granted by the resolution of the Board of Directors dated May 14, 1981, which said resolution has not been amended nor rescinded and of which the following is a true and complete copy:

"RESOLVED that the President or any Vice President or Secretary may appoint Resident Vice Presidents, Resident Assistant Secretaries and Attorneys-in-Fact in any State, Territory or Federal District to represent this Company and to act on its behalf within the scope of the authority granted to them in writing, which authority may include the power to make, execute, seal and deliver on behalf of this Company as surety and as its act and deed any and all bonds and undertakings of suretyship and other documents that the ordinary course of surety business may require; and any such Resident Vice President, Resident Assistant Secretary or Attorney-in-Fact may be removed and the authority granted him revoked by the President or any Vice President or Secretary or by the Board of Directors."

Pursuant to the foregoing grant of authority, the undersigned President, R. A. Rasmussen, does hereby nominate, constitute and appoint Lloyd G. Stickler, Richard D. Ries, or Kevin P. Mandeville, Lansing, Michigan, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver for and on its behalf, as surety, any and all bonds and undertakings of suretyship, and the execution of such bonds or undertakings, in pursuance of these presents shall be as binding upon the said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the said Company in their own proper persons.

In witness whereof, the MICHIGAN MILLERS MUTUAL INSURANCE COMPANY has caused these presents to be signed by its President and its corporate seal to be hereto affixed this 7<sup>th</sup> day of May, 2007.

Attest:

MICHIGAN MILLERS MUTUAL INSURANCE COMPANY

(SEAL)

James A Pratt

J. A. Pratt, Secretary

By Richard A. Rasmussen

R. A. Rasmussen, President

STATE OF MICHIGAN ( )  
COUNTY OF INGHAM ( )

On this day, before the subscriber, a Notary Public in and for said County and State, duly commissioned and qualified, came the above named officer of the MICHIGAN MILLERS MUTUAL INSURANCE COMPANY, to me personally known to be the individual and officer who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposed and saith, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the corporate seal of the said Company, and that the said corporate seal and his signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Company.

In witness whereof, I have hereunto set my hand and affixed my official seal, at Lansing, Michigan, this 7<sup>th</sup> day of May, 2007.

(SEAL)

My commission expires January 7, 2012

Brenda K. Smith  
Notary Public

I, the undersigned, Secretary of the MICHIGAN MILLERS MUTUAL INSURANCE COMPANY, do hereby certify that the original POWER OF ATTORNEY, of which the foregoing is a full, true and correct copy, is in full force and effect.

In witness whereof, I have hereunto subscribed my name as Secretary, and affixed the corporate seal of the Company, this 1st day of AUGUST, 2008.

(SEAL)

James A Pratt  
Secretary