No. **W 2753**	**Due no later than Aug 31, 2011**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** DELTA FARMS, LLC MICHAEL T LEWIS BOX 631 1627 S 2350 E MALTA ID 83342	MICHAEL T LEWIS 1627 S 2350 E MALTA ID 83342 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	Country	Postal Code
MEMBER	RODNEY N HALL	#2 JANE LN BOX 631	MALTA	ID	USA	83342

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 2753**	Signature: Michael T Lewis	Date: 06/20/2011
	Name (type or print): Michael T Lewis	Title: Member

Processed 06/20/2011

* Electronically provided signatures are accepted as original signatures.