

|                                                                                                                                                        |               |                                                                                                                                          |       |                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|-------------|--|
| No. <b>W 113940</b>                                                                                                                                    |               | Due no later than May 31, 2013                                                                                                           |       | 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>1. Mailing Address: Correct in this box if needed.</b><br><br>DEER PARKS LLC<br>3556 E 960 N<br>MENAN ID 83434                        |       | AARON SMITH<br>3556 E 960 N<br>MENAN ID 83434      |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                          |       | 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 |  |
| MEMBER                                                                                                                                                 | AARON P SMITH | 3556 E 960 N                                                                                                                             | MENAN | ID                                                 | USA     | 83434       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 113940</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Aaron P. Smith<br>Name (type or print): Aaron P. Smith<br>Date: 05/10/2013<br>Title: Mr. |       |                                                    |         |             |  |
| Processed 05/10/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                |       |                                                    |         |             |  |