

|                                                                                                                                                        |                     |                                                                                                                                                           |       |                                                             |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------|---------|------------------|--|
| No. <b>W 55199</b>                                                                                                                                     |                     | <b>Due no later than Oct 31, 2010</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>1. Mailing Address: Correct in this box if needed.</b><br><br>PRESCOTT FARM LLC<br>DAVID L. PALFREYMAN<br>5001 FIFESHIRE PL N<br>BOISE ID 83713<br>USA |       | DAVID L PALFREYMAN<br>5001 FIFESHIRE PL N<br>BOISE ID 83713 |         |                  |  |
|                                                                                                                                                        |                     |                                                                                                                                                           |       | 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                                                                                                                                                | DAVID L. PALFREYMAN | 5001 FIFESHIRE PL N                                                                                                                                       | BOISE | ID                                                          | USA     | 83713            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                     | 6. Annual Report must be signed.*                                                                                                                         |       |                                                             |         |                  |  |
| <b>ID<br/>W 55199</b>                                                                                                                                  |                     | Signature: David L. Palfreyman                                                                                                                            |       |                                                             |         | Date: 08/09/2010 |  |
|                                                                                                                                                        |                     | Name (type or print): David L. Palfreyman                                                                                                                 |       |                                                             |         | Title: Manager   |  |
| Processed 08/09/2010                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.                                                                                 |       |                                                             |         |                  |  |