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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------|---------|------------------|--|
| No. <b>W 101728</b>                                                                                                                                    |                    | <b>Due no later than Mar 31, 2016</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>DIAMOND PEAK FARMS LLC<br>WILLIAM E STODDART<br>1849 N 800 E<br>MONTEVIEW ID 83435 |           | WILLIAM E STODDART<br>1849 N 800 E<br>MONTEVIEW ID 83435 |         |                  |  |
|                                                                                                                                                        |                    |                                                                                                                                                     |           | 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                                                                                                                                                | WILLIAM E STODDART | 1849 N 800 E                                                                                                                                        | MONTEVIEW | ID                                                       | USA     | 83435            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                    | 6. Annual Report must be signed.*                                                                                                                   |           |                                                          |         |                  |  |
| <b>ID<br/>W 101728</b>                                                                                                                                 |                    | Signature: William E. Stoddart                                                                                                                      |           |                                                          |         | Date: 01/21/2016 |  |
|                                                                                                                                                        |                    | Name (type or print): William E. Stoddart                                                                                                           |           |                                                          |         | Title: Manager   |  |
| Processed 01/21/2016                                                                                                                                   |                    | * Electronically provided signatures are accepted as original signatures.                                                                           |           |                                                          |         |                  |  |