| No. <b>W 51083</b>                                                                             |      | Due no later than May 31, 2015                                                                                                                              |                          | 2. Registered Agent and Address (NO PO BOX)                           |       |         |             |
|------------------------------------------------------------------------------------------------|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------|-------|---------|-------------|
| Return to:                                                                                     |      | Annual Report Form                                                                                                                                          |                          | L DAVID MCKINNEY                                                      |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |      | 1. Mailing Address: Correct in this box if needed.  DMG-E&W LAS VEGAS, LLC DAVID MCKINNEY DMG REAL ESTATE PARTNERS, LLC 350 N 9TH ST STE 201 BOISE ID 83702 |                          | 350 N 9TH ST STE 201 BOISE 83702  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE                                                       |      | USA                                                                                                                                                         |                          |                                                                       |       |         |             |
| 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 DMG REAL ES                                                                            |      | STATE PARTNERS LLC                                                                                                                                          | 5243 W HIDDEN SPRINGS DR | BOISE                                                                 | ID    |         | 83714       |
| 5. Organized Under the Laws of:                                                                |      | 6. Annual Report must be signed.*                                                                                                                           |                          |                                                                       |       |         |             |
| ID<br>W 51083                                                                                  |      | Signature: L David McKinney                                                                                                                                 |                          | Date: 04/02/2015                                                      |       |         |             |
|                                                                                                |      | Name (type or print):                                                                                                                                       | Title: Partner           |                                                                       |       |         |             |
| Processed 04/02/2015 * Electronically provided signatures are accepted as original signatures. |      |                                                                                                                                                             |                          |                                                                       |       |         |             |