No. <b>W 25574</b>		Due no later than Aug 31, 2009 Annual Report Form  1. Mailing Address: Correct in this box if needed.  DIVCOM FINANCIAL, LLC GAVIN MCCALEB PO BOX 8864 BOISE ID 83707		2. Registered	2. Registered Agent and Address (NO PO BOX)  GAVIN R MCCALEB  12737 N 9TH AVE  BOISE ID 83714  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE				12737 N 9T				
				3. <u>New</u> Regist				
4. Limited Liability Compan	nies: Enter Nar	nes and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	GAVIN MCCALEB MAREN MCCALEB		12737 N 9TH 12737 N 9TH	BOISE BOISE	ID ID	USA USA	83714 83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: (	Gavin McCaleb		Date: 06/10/2009			
W 25574		Name (type	or print): Gavin McCaleb		Title: Manager			
Processed 06/10/2009 * Electronically provided signatures are accepted as original signatures.								