No. W 85243		Due no later than Jul 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SHARON GATES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. NATURAL CAPITALIST LLC (THE) SHARON GATES 4672 FLORA POCATELLO ID 83204		4672 FLORA POCATELLO ID 83204 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street o	r PO Address	City	State	Country	Postal Code
MANAGER	SHARON GA	TES 4672 FL	ORA	POCATELLO	ID	USA	83204
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Neil Furniss		Date: 07/08/2011			
W 85243		Name (type or print): Neil Furniss		Title: Accountant			
Processed 07/08/2011 * Electronically provided signatures are accepted as original signatures.							