No. <b>W 84431</b>		Due no later than Jun 30, 2011 Annual Report Form  1. Mailing Address: Correct in this box if needed.  KRAMER DIVERSIFIED, LLC HOWARD UTZMAN ATTY 1230 SE BISHOP BLVD PULLMAN WA 99163		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				1524 S VIEV	DAVID KRAMER 1524 S VIEWPOINT LEWISTON ID 83501  3. New Registered Agent Signature:*			
				3. <u>New</u> Registe				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	MICHAEL D	KRAMER	1101 LIBERTY CIRCLE	CLARKSTON	WA	USA	99403	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
WA W 84431		Signature: Mi	Date	Date: 05/15/2011				
		Name (type o	Title	Title: President, Owner				
Processed 05/15/2011 * Electronically provided signatures are accepted as original signatures.								