No. W 96768 Return to:		Due no later than Sep 30, 2011 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX) DARLENE LOUISE BROWN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. D.L.B. LLC DARLENE L BROWN 1838 ALTURAS DR TWIN FALLS ID 83301 USA			1838 ALTURAS DR TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nar	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	DARLENE L	BROWN	1838 ALTURAS DR.		TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Darlene L.brown			Date: 07/15/2011			
W 96768		Name (type or print): Darlene L.brown			Title: Owmer/MANGER			
Processed 07/15/2011 * Electronically provided signatures are accepted as original signatures.								