No. **W 61634**	**Due no later than Apr 30, 2011** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** BLINCOE DIVERSIFIED ALTERNATIVES L.L.C. DAMON BLINCOE 208 LAUREL LN CHUBBUCK ID 83202	DAMON BLINCOE 9798 GIBSON JACK RD POCATELLO ID 83204 3. New Registered Agent Signature:*

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	DAMON BLINCOE	9798 GIBSON JACK RD	POCATELLO	ID	USA	83204
MANAGER	KATHI BLINCOE	9798 GIBSON JACK RD	POCATELLO	ID	USA	83204

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 61634**	Signature: Kathi Blincoe	Date: 02/10/2011
	Name (type or print): Kathi Blincoe	Title: Owner

Processed 02/10/2011

* Electronically provided signatures are accepted as original signatures.