No. W 38422		Due no later than Apr 30, 2013		2. Registered Ag	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. ALLIANCE PROVIDERS, LLC KIRK MOORE 10482 W CARLTON BAY DR. GARDEN CITY ID 83714 USA		101 S CAPITO BOISE ID 83	PAUL M BOYD 101 S CAPITOL STE 1900 BOISE ID 83702 3. New Registered Agent Signature:*			
4. Limited Liability Comp		nes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER	DAVID PETERMAN MD TRACY MORRIS JEFF ROBBINS		6348 W EMERALD ST 10482 W. CARLTON BAY DR 10482 W. CARLTON BAY DR.	BOISE GARDEN CITY GARDEN CITY	ID ID ID	USA USA USA	83704 83714 83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 38422		Signature: Kirk Moore Name (type or print): Kirk Moore			Date: 02/13/2013 Title: Director of Accounting			
Processed 02/13/2013		* Electronically pro	ovided signatures are accepted as original	signatures.				