No. <b>W 84584</b> Return to:		Due no later than Jun 30, 2013 Annual Report Form  1. Mailing Address: Correct in this box if needed.  ALPINE EDGE PROFESSIONALS, LLC PRESTON RUFE PO BOX 204 CARMEN ID 83462 USA			2. Registered Agent and Address (NO PO BOX)  PRESTON F RUFE  373 CARMEN CREEK RD  CARMEN ID 83462  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
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 or PO Address		City	State	Country	Postal Code
MEMBER	PRESTON RUFE		PO BOX 204		CARMEN	ID	USA	83462
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Preston F Rufe			Date: 05/08/2013			
W 84584		Name (type or print): Preston F Rufe			Title: Owner			
Processed 05/08/2013 * Electronically provided signatures are accepted as original signatures.								