

No. W 126835	Due no later than Jul 31, 2014 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. ALPINE INSURANCE GROUP, LLC SEEDALL LAW OFFICE PC PO BOX 3179 IDAHO FALLS ID 83403		SCOTT R SEEDALL 1192 S 52ND E IDAHO FALLS ID 83401			
			3. <u>New</u> 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	STEVE FRANSEN	C/O SEEDALL LAW OFFICE PC PO BOX 3179	IDAHO FALLS	ID	USA	83403
5. Organized Under the Laws of: ID W 126835		6. Annual Report must be signed.* Signature: Scott Seedall Name (type or print): Scott Seedall Date: 08/17/2014 Title: Attorney				
Processed 08/17/2014		* Electronically provided signatures are accepted as original signatures.				