No. W 96650		Due no later than Sep 30, 2013		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHAEL LA	MICHAEL LAVIGNE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CAPITAL PEAK PARTNERS, LLC MICHAEL LAVIGNE 602 CEDAR STREET #205 WALLACE ID 83873		WALLACE II	221 CEDAR STREET WALLACE ID 83873 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	MICHAEL B	LAVIGNE	221 CEDAR STREET	WALLACE	ID	USA	83873	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 96650		Signature: Mid		Date: 07/17/2013				
		Name (type or		Title: Manager				
Processed 07/17/2013 * Electronically provided signatures are accepted as original signatures.								