No. <b>W 17000</b> Return to:		Due no later than Nov 30, 2014  Annual Report Form			Registered Agent and Address (NO PO BOX)     KATHERINE H RIXON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  ALPINE ESTATES, L.L.C.  KATHERINE RIXON  PO BOX 6954  KETCHUM ID 83340		HAILEY ID	241 EAST FORK RD HAILEY ID 83333  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nar	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	KATHERINE	H RIXON	PO BOX 6954	KETCHUM	ID	USA	83340	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Katherine Rixon			Date: 09/19/2014			
W 17000		Name (type or	print): Katherine Rixon		Title: Manager			
Processed 09/19/2014 * Electronically provided signatures are accepted as original signatures.								