No. <b>W 63421</b> Return to:		Due no later than Jun 30, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  VIEWPOINTE LLC CYNTHIA MURPHY PO BOX 6570 KETCHUM ID 83340 USA		2	2. Registered Agent and Address (NO PO BOX)  LOUIS M BOYLE 166 BARLOW ROAD KETCHUM ID 83340  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 Compa	nies: Enter Na	mes and Addresses of	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	CYNTHIA M	URPHY	PO BOX 6570		KETCHUM	ID	USA	83340
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 63421		Signature: Cynthia Murphy			Date: 06/27/2014			
		Name (type or print): Cynthia Murphy			Title: Manager			
Processed 06/27/2014 * Electronically provided signatures are accepted as original signatures.								