No. **W 149703**	**Due no later than Mar 31, 2016** **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 NUTRIENTS, LLC 255 B ST #317 IDAHO FALLS ID 83402	RICHARD BARTON 255 B ST #317 IDAHO FALLS ID 83401-8340 3. New 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
MEMBER	SKYLAR HILLEBRANT	856 BUCKBOARD LN	IDAHO FALLS	ID	USA	8340
MEMBER	RICHARD BARTON	8487 N YELLOWSTONE HWY	IDAHO FALLS	ID	USA	83401

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 149703**	Signature: Richard Barton	Date: 05/14/2016
	Name (type or print): Richard Barton	Title: Partner

Processed 05/14/2016

* Electronically provided signatures are accepted as original signatures.