| No. W 108766 | | Due no later than Dec 31, 2012 | 2. Registered Agent and Address (NO PO BOX) LISA LAW 619 W HWY 26 BLACKFOOT ID 83221 3. New Registered Agent Signature:* | | | | |
|-------------------------------------------------------------------------------------|------------|-------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. ALPINE SUPPLY, LLC LISA LAW 619 W HWY 26 BLACKFOOT ID 83221 | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | age and Addresses of at least an Mambay or Manager | | | | | |
| 20 20 2 | Name | nes and Addresses of at least one Member or Manager. Street or PO Address | City | State | Country | Postal Code | |
| | KENNETH LA | | IDAHO FALLS | ID | USA | 83406 | |
| 5. Organized Under the Laws of: WY W 108766 | | 6. Annual Report must be signed.* Signature: Patty Coffey Name (type or print): Patty Coffey | Date: 10/30/2012 Title: Office Manager | | | | |
| Processed 10/30/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |