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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------------------|---------------------|
| No. <b>W 48666</b>                                                                                                                                     |                  | <b>Due no later than Mar 31, 2015</b>                                                                                                                                                                    |         | <b>2. Registered Agent and Address (NO PO BOX)</b>              |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>QUICK RESPONSE FIRE & ENVIRONMENTAL, LLC.<br>DARREN D PICKERING<br>PO BOX 160<br>KOOSKIA ID 83539-0160 |         | DARREN PICKERING<br>146 CEDAR HOLLOW LANE<br>KOOSKIA 83539-0160 |                     |
|                                                                                                                                                        |                  |                                                                                                                                                                                                          |         | 3. <u>New</u> 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                                                                                                                                                 | DARREN PICKERING | PO BOX 160                                                                                                                                                                                               | KOOSKIA | ID                                                              | 83539               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 48666</b>                                                                                           |                  | 6. Annual Report must be signed.*<br>Signature: darren pickering<br>Name (type or print): darren pickering<br>Date: 04/06/2015<br>Title: member                                                          |         |                                                                 |                     |
| Processed 04/06/2015                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                                                |         |                                                                 |                     |