

No. W 85235		Due no later than Jul 31, 2016		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		Annual Report Form		CHERYL A ROBERTSON 227 MADISON ST W KIMBERLY ID 83341			
		1. Mailing Address: Correct in this box if needed.					
		ROBERTSON QUALITY ASSURANCE PLLC CHERYL A ROBERTSON 227 MADISON ST W KIMBERLY ID 83341		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	
MANAGER	CHERYL A ROBERTSON	227 MADISON ST. W.	KIMBERLY	ID	USA	83341-8334	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 85235		Signature: Cheryl A. Robertson				Date: 05/23/2016	
		Name (type or print): Cheryl A. Robertson				Title: Manager	
Processed 05/23/2016		* Electronically provided signatures are accepted as original signatures.					