

|  |                        |   |  |  |             |                |                           |
|--|------------------------|---|--|--|-------------|----------------|---------------------------|
| No. <b>W 148931</b>  |                        | <b>Due no later than Mar 31, 2016</b><br><b>Annual Report Form</b>  |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )         |             |                |                           |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                        | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>TAL QUALITY CONSULTANTS, LLC<br>THOMAS A LOWER<br>36 WEST 4TH SOUTH<br>PRESTON ID 83263-1425 |  | THOMAS A LOWER<br>36 WEST 4TH SOUTH<br>PRESTON ID 83263-1425 |             |                |                           |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                        |   |  | 3. <u>New</u> Registered Agent Signature:*                   |             |                |                           |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                        |   |  |  |             |                |                           |
| Office Held<br>MEMBER  | Name<br>THOMAS A LOWER | Street or PO Address<br>36 WEST 4TH SOUTH   |  | City<br>PRESTON  | State<br>ID | Country<br>USA | Postal Code<br>83263-1425 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 148931</b>                                |                        | 6. Annual Report must be signed.*<br><br>Signature: Thomas A. Lower<br>Name (type or print): Thomas A. Lower<br><br>Date: 02/01/2016<br>Title: Owner          |  |  |             |                |                           |
| Processed 02/01/2016 * Electronically provided signatures are accepted as original signatures.     |                        |   |  |  |             |                |                           |