

No. W 2014		Due no later than Jan 31, 2013		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		LAUREN SLETTE 11132 W HICKORY DALE DR BOISE ID 83713			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		QBRESOURCE, LLC LAUREN SLETTE 3355 N FIVE MILE RD, #141 BOISE ID 83713					
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	LAUREN K SLETTE	11132 W HICKORY DALE DR	BOISE	ID	USA	83713	
MANAGER	MICHAEL O SLETTE	11132 W HICKORY DALE DR	BOISE	ID	USA	83713	
5. Organized Under the Laws of: ID W 2014		6. Annual Report must be signed.* Signature: Lauren Slette Name (type or print): Lauren Slette		Date: 02/11/2013 Title: Manager			
Processed 02/11/2013		* Electronically provided signatures are accepted as original signatures.					