No. <b>C 199318</b>		Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to:				CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SCIQUEST, INC. 6501 WESTON PARKWAY SUITE 200 CARY NC 27513					
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registe	ered Agent Si	gnature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	STEVEN NELSON		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
DIRECTOR	DANIEL GILLIS		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
DIRECTOR	JEFFREY BARBER		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
DIRECTOR	TIMOTHY BUCKLEY		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
VICE PRESIDENT	JENNIFER KAELIN		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
TREASURER	RUDY HOWARD		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
SECRETARY	GRANT COLLINGSWORTH		6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
PRESIDENT	STEPHEN W	IEHE	6501 WESTON PARKWAY SUITE 200	CARY	NC	USA	27513
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE C 199318		Signature: Jennifer Kaelin		Date: 08/12/2014			
		Name (type or print): Jennifer Kaelin		Title: Vice President			
Processed 08/12/2014 * Electronically provided signatures are accepted as original signatures.							