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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 78976</b>                                                                                                                                     |                  | <b>Due no later than Nov 30, 2014</b>                                                                                                                 |            | 2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b><br><br>RES-Q LLC<br>LINDA L. ROBERTS<br>720 WASHINGTON STREET<br>MONTPELIER ID 83254<br>USA |            | LINDA L ROBERTS<br>612 JEFFERSON ST<br>MONTPELIER 83254 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                       |            | 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                                                                                                                                                | LINDA L. ROBERTS | 612 JEFFERSON STREET                                                                                                                                  | MONTPELIER | ID                                                      | USA     | 83254       |  |
| MANAGER                                                                                                                                                | RONALD K. HUNTER | 445 E. 8680 S.                                                                                                                                        | SANDY      | UT                                                      | USA     | 84070       |  |
| MEMBER                                                                                                                                                 | LARUE NELSON     | 410 E. ALICE                                                                                                                                          | BLACKFOOT  | ID                                                      | USA     | 83221       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 78976</b>                                                                                           |                  | 6. Annual Report must be signed.*<br>Signature: Linda L. Roberts<br>Name (type or print): Linda L. Roberts                                            |            |                                                         |         |             |  |
| Date: 12/21/2014<br>Title: Manager                                                                                                                     |                  |                                                                                                                                                       |            |                                                         |         |             |  |
| Processed 12/21/2014                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                             |            |                                                         |         |             |  |