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|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|------------------|--|
| No. <b>C 132035</b>                                                                                                                                    |                | <b>Due no later than Jan 31, 2015</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>LESLIE QUINN INSURANCE AGENCY INC.<br>LESLIE D QUINN<br>10666 OVERLAND RD<br>BOISE ID 83709<br>USA |       | LESLIE QUINN<br>10666 OVERLAND RD<br>BOISE 83709   |         |                  |  |
|                                                                                                                                                        |                |                                                                                                                                                                 |       | 3. <u>New</u> Registered Agent Signature:*         |         |                  |  |
| 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      |  |
| PRESIDENT                                                                                                                                              | LESLIE D QUINN | 10666 OVERLAND RD                                                                                                                                               | BOISE | ID                                                 | USA     | 83709            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                               |       |                                                    |         |                  |  |
| <b>ID<br/>C 132035</b>                                                                                                                                 |                | Signature: Leslie D. Quinn                                                                                                                                      |       |                                                    |         | Date: 11/20/2014 |  |
|                                                                                                                                                        |                | Name (type or print): Leslie D. Quinn                                                                                                                           |       |                                                    |         | Title: President |  |
| Processed 11/20/2014                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                       |       |                                                    |         |                  |  |