No. W 31462		Due no later than Jun 30, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. QUARTER CIRCLE L, LLC MAX LOVELAND 39 PROFESSIONAL PLAZA REXBURG ID 83440		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	QUARTER MAX LOV 39 PROFE			MAX LOVELAND 3257 W 4000 N REXBURG ID 83440 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DAT		resses of at least one Member or Manager.					
Office Held Nar		Street or PO Address	City	State	Country	Postal Code	
MEMBER MAX	X LOVELAND ARL LOVELAND	3257 W 4000 N 3257 W 4000 N	REXBURG REXBURG	ID ID	USA USA	83440 83440	
5. Organized Under the Laws of	of: 6. Annual R	6. Annual Report must be signed.*					
ID	Signature	Signature: Max Loveland Date: 07/09/2012					
W 31462	Name (ty	Name (type or print): Max Loveland Title: Member					
Processed 07/09/2012	* Electronica	* Electronically provided signatures are accepted as original signatures.					