No. C 174097		Due no later than Jul 31, 2013		2. Registered Agent and Address (NO PO BOX)											
Return to:		Annual Report Form		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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.													
		LEAVITT GROUP BENEFITS SERVICES OF BOISE, INC. DWAYNE SPEEGLE 6220 N DISCOVERY WAY STE 110 BOISE ID 83713													
								4. Corporations: Ent	er Names and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasure	r (optional).			
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	DWAYNE SP	EEGLE	6220 N. DISCOVERY WAY STE 110	BOISE	ID	USA	83713								
PRESIDENT	MIKE LEAVI	Т	216 S 200 W	CEDAR CITY	ID	USA	84720								
DIRECTOR	CTOR DANE O LEAVITT		216 S 200 W	CEDAR CITY	UT	USA	84720								
DIRECTOR	ERIC O LEAVITT		216 S 200 W	CEDAR CITY	UT	USA	84720								
SECRETARY	MARK G KE	NNEY	216 S 200 W	CEDAR CITY	UT	USA	84720								
5. Organized Under the Laws of:		6. Annual Report must be signed.*													
ID		Signature: Alyce Hillman		Date: 05/20/2013											
C 174097		Name (type or print): Alyce Hillman		Title: Director Operations											

* Electronically provided signatures are accepted as original signatures.

Processed 05/20/2013