

No. W 124636	Due no later than Apr 30, 2016 Annual Report Form	2. Registered Agent and Address (NO PO BOX)	
Return to: 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. QUALITY H2O PLUS LLC LYNETTE MACFEE 1101 E. JEFFERSON ST. BOISE ID 83712	LYNETTE MACFEE 1101 E. JEFFERSON ST. BOISE ID 83712	
		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	LYNETTE MACFEE	1101 E. JEFFERSON ST	BOISE ID USA 83712
5. Organized Under the Laws of: ID W 124636	6. Annual Report must be signed.* Signature: Lynette MacFee Name (type or print): Lynette MacFee		Date: 02/26/2016 Title: Pres
Processed 02/26/2016		* Electronically provided signatures are accepted as original signatures.	