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filed pursuant to §7-90-301, et se	Periodic Report eq. and §7-90-501 of the Co	olorado Revise	ed Statutes (C.R.S)	
ID number:	20091594696			
Entity name:	Sapphire QC Audits, LLC			
Jurisdiction under the law of which the entity was formed or registered:	Colorado			
1. Principal office street address:	642 Torrey Pines Ln (Street name and number)			
	Johnstown (City)	<u> </u>	80534 (Postal/Zip Code)	
	(Province – if applicable)		States - if not US)	
2. Principal office mailing address: (if different from above)	(Street name and nu	mber or Post Office	e Box information)	
	(City)	(State)	(Postal/Zip Code)	
	(Province – if applicable)		- if not US)	
3. Registered agent name: (if an individual)	Dehner	Tracey (First)	$\frac{L}{(Middle)} {(Suffix)}$	
or (if a business organization)				
4. The person identified above as registered	d agent has consented to b	eing so appoin	ited.	
5. Registered agent street address:	642 Torrey Pines Ln			
	(Street name and number)			
	Johnstown	CO	80534	
	(City)	(State)	(Postal/Zip Code)	
6. Registered agent mailing address: (if different from above)	(Street name and number or Post Office Box information)			
	(City)	(State)	(Postal/Zip Code)	
	(Province – if applicable)	(Country – if	not US)	

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Dehner	TraceyL			
(Last)	(First)	(Middle) (Suffix)		
642 Torrey Pines Ln				
(Street name and number or Post Office Box information)				
Johnstown	CO 8053	CO 80534		
(City)	United States	(Postal/Zip Code)		
(Province – if applicable)	(Country – if not US)	_		
	(Last) 642 Torrey Pines Ln (Street name and Johnstown (City)	(Last) (First) 642 Torrey Pines Ln (Street name and number or Post Office Bo. Johnstown (City) CO (State) United States		

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box and include an attachment stating the name and address of such individuals.)

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