

No. <b>W 64597</b>		<b>Due no later than Jul 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  P R 93 LLC JIM PRIMM PO BOX 2076 TWIN FALLS ID 83301		JIM PRIMM 3345E 4050N TWIN FALLS ID 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name JAMES R PRIMM	Street or PO Address 3345 E 4050 N		City TWIN FALLS	State ID	Country	Postal Code 83301
5. Organized Under the Laws of:  <b>ID</b> <b>W 64597</b>		6. Annual Report must be signed.*  Signature: Jim Primm Name (type or print): Jim Primm  Date: 08/11/2016 Title: member					
Processed 08/11/2016      * Electronically provided signatures are accepted as original signatures.							