No. <b>W 8204</b>		Due no later than Mar 31, 2017		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MICHAEL R HARGRAVE			
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.		d.	40 N ELIJAH DR NAMPA ID 83651			
		PRAIRIE EAGLE EXPRESS L.L.C. MICHAEL R HARGRAVE P O BOX 923						
		NAMPA ID 83653		3	3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Comp	anies: Enter Na	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER MANAGER	MICHAEL R JAN HARGRA	HARGRAVE VE M HARGRAVE	40 ELIJAH DR 40 ELIJAH		nampa Nampa	ID ID	USA	83651 83651
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Michael R Hargrave			Date: 01/20/2017			
W 8204		Name (type or print): Michael R Hargrave			Title: Member			
Processed 01/20/2017		* Electronically provid	ed signatures are accepted as origi	inal signat	ures.			