| No. C 87873 | | Due no later than Oct 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------|--|-------------------------------|--|-------|---------|-------------|
| Return to: | | Annual Report Form | | CHRISTI MURIE | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. MURIE GRAPHIC DESIGN, INC. JAMES ALBERT 199 N. CAPITOL SUITE 400 BOISE ID 83702 Dess Addresses of President, Secretary, and Directors. Treasurer of | | 199 N CAPITOL BLVD STE 400 BOISE ID 83702 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | (astional) | | | |
| 200 | | less addresses of Presid | | | Ctata | Country | Doctal Code |
| Office Held | Name | LDEDT | Street or PO Address | City | State | Country | Postal Code |
| PRESIDENT | JAMES M A | LBERT | 199 N. CAPITOL BLVD SUITE 400 | BOISE | ID | USA | 83702 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID C 87873 | | Signature: christi Murie | | Date: 09/30/2016 | | | |
| | | Name (type or print): christi Murie | | Title: President | | | |
| Processed 09/30/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | |