

No. C 105566	Due no later than Mar 31, 2017 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. PRIME, INC. TIM GRAVER 1406 N. MAIN STREET SUITE 215 MERIDIAN ID 83642		TIM GRAVER 1406 N. MAIN STREET SUITE 215 MERIDIAN ID 83642			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	TIM GRAVER	706 E. CHOLLA HILLS STREET	MERIDIAN	ID	USA	83646
5. Organized Under the Laws of: ID C 105566	6. Annual Report must be signed.* Signature: Tim Graver Name (type or print): Tim Graver		Date: 04/26/2017 Title: President			
Processed 04/26/2017		* Electronically provided signatures are accepted as original signatures.				