

|                                                                                                                                                        |               |                                                                                                                                           |      |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------|---------|------------------|--|
| No. <b>C 153624</b>                                                                                                                                    |               | <b>Due no later than Mar 31, 2017</b>                                                                                                     |      | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>GRIND CENTRAL STATION INC.<br>ROBERT K AMES<br>PO BOX 8<br>TROY ID 83871 |      | ROBERT K AMES<br>121 MARY STREET<br>TROY ID 83871  |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                           |      | 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                                                                                                                                              | ROBERT K AMES | PO BOX 8 121 MARY STREET                                                                                                                  | TROY | ID                                                 | USA     | 83871            |  |
| SECRETARY                                                                                                                                              | LAURIE S AMES | PO BOX 8 121 MARY STREET                                                                                                                  | TROY | ID                                                 | USA     | 83871            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                         |      |                                                    |         |                  |  |
| <b>ID<br/>C 153624</b>                                                                                                                                 |               | Signature: Laurie Ames                                                                                                                    |      |                                                    |         | Date: 05/01/2017 |  |
|                                                                                                                                                        |               | Name (type or print): Laurie Ames                                                                                                         |      |                                                    |         | Title: Secretary |  |
| Processed 05/01/2017                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                 |      |                                                    |         |                  |  |