

No. <b>W 119541</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 03/10/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MARILYN TAYLOR 5604 STAMM LANE NAMPA ID 83687
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> PRIME INTEREST LLC 123 GROUSE DR CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <u>Jessica Dzurc</u> <u>123 Grouse Dr</u> <u>Caldwell Id.</u> <u>USA</u> <u>83605</u>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold; font-size: large;">             IDAHO              W 119541           </div>		6. Signature: _____ <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">           Name (type or print): <u>Jessica Dzurc</u> </div> <div style="width: 35%;">           Date: <u>5-29-14</u> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <u>Jessica Dzurc</u> </div> <div style="width: 35%;">           Title: <u>owner</u> </div> </div>	
Issued 05/29/2014 by CLH			

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM