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|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------|---------|------------------|--|
| No. <b>C 133395</b>                                                                                                                                    |              | <b>Due no later than Apr 30, 2014</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>"40" EQUIPMENT SALES, INC.<br>PAUL FORTE<br>PO BOX 3550<br>HAYDEN ID 83835 |        | PAUL FORTE<br>10833 N GOVERNMENT WAY<br>HAYDEN ID 83835 |         |                  |  |
|                                                                                                                                                        |              |                                                                                                                                             |        | 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                                                                                                                                              | PAUL D FORTE | PO BOX 3550                                                                                                                                 | HAYDEN | ID                                                      | USA     | 83835-3550       |  |
| 5. Organized Under the Laws of:                                                                                                                        |              | 6. Annual Report must be signed.*                                                                                                           |        |                                                         |         |                  |  |
| <b>ID<br/>C 133395</b>                                                                                                                                 |              | Signature: Paul Forte                                                                                                                       |        |                                                         |         | Date: 02/10/2014 |  |
|                                                                                                                                                        |              | Name (type or print): Paul Forte                                                                                                            |        |                                                         |         | Title: President |  |
| Processed 02/10/2014                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                   |        |                                                         |         |                  |  |