No. <b>W 60106</b> Return to:		Due no later than Mar 31, 2016  Annual Report Form			2. Registered Agent and Address (NO PO BOX) LESA D HORROCKS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  NORTHPAC EQUIPMENT, LLC LESA D HORROCKS PO BOX 722 POCATELLO ID 83204-0722			205 W BUELL ST POCATELLO ID 83204  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	Cit	.y	State	Country	Postal Code
MEMBER	LESA D HORROCKS		PO BOX 722	PC	CATELLO	ID	USA	83204-0722
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 60106		Signature: LESA D HORROCKS Date: 03/03/2016						
		Name (type or print): LESA D HORROCKS			Title: MEMBER			
* Electronically provided signatures are accepted as original signatures.								