No. W 14360		Due no later than Feb 28, 2011			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.						
		NORTHWEST FOOD PRODUCTS TRANSPORTATION, LLC LAW DEPARTMENT MS 2500 PO BOX 64101			USA 3. New Registered Agent Signature:*			
		ST PAUL MN 55164-0101						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Nar	nes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	MANAGER PAUL A DELP		PO BOX 64101		ST. PAUL	MN	USA	55164-0101
MANAGER FERNANDO F		PALACIOS	PO BOX 64101		ST. PAUL	MN	USA	55164-0101
MANAGER JIM SLEPER			PO BOX 64101		ST. PAUL	MN	USA	55164-0101
5. Organized Under the Laws of:		6. Annual Repo	ort must be signed.*					
WI W 14360		Signature: Paul Delperdang			Date: 02/15/2011			
		Name (type or print): Paul Delperdang			Title: Manager			
Processed 02/15/2011	* Electronically provided signatures are accepted as original signatures.							