

|  |                          |  |  |   |             |         |                      |
|--|--------------------------|--|--|---|-------------|---------|----------------------|
| No. <b>W 22626</b>   |                          | <b>Due no later than Feb 28, 2017</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )              |             |         |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                          | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>WHITEPINE MACHINERY, LLC<br>DALE G. PRITCHARD<br>PO BOX 264<br>ST MARIES ID 83861         |  | DALE G PRITCHARD<br>2827 CASSANDRA HILLS RD<br>ST MARIES ID 83861 |             |         |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                          |  |  | 3. <u>New</u> Registered Agent Signature:*                        |             |         |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                          |  |  |   |             |         |                      |
| Office Held<br>MANAGER   | Name<br>DALE G PRITCHARD | Street or PO Address<br>2827 CASSANDRA HILLS RD  |  | City<br>ST MARIES   | State<br>ID | Country | Postal Code<br>83861 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 22626</b>                                 |                          | 6. Annual Report must be signed.*<br><br>Signature: Dale G. Pritchard<br>Name (type or print): Dale G. Pritchard<br><br>Date: 04/07/2017<br>Title: Manager |  |   |             |         |                      |
| Processed 04/07/2017 * Electronically provided signatures are accepted as original signatures.     |                          |  |  |   |             |         |                      |