

No. W 99346		Due no later than Jan 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SSTS LLC STEPHEN D SHOCKEY 1090 N 17 E MOUNTAIN HOME ID 83647 USA		STEPHEN SHOCKEY 1090 N 17 E MOUNTAIN HOME 83647			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SALLY L SHOCKEY	1090 N 17TH E	MOUNTAIN HOME	ID	USA	83647	
MEMBER	STEPHEN D SHOCKEY	1090 N 17TH E	MOUNTAIN HOME	ID	USA	83647	
5. Organized Under the Laws of: ID W 99346		6. Annual Report must be signed.* Signature: Sally L Shockey Name (type or print): Sally L Shockey					
		Date: 11/24/2014 Title: Member					
Processed 11/24/2014 * Electronically provided signatures are accepted as original signatures.							