

|  |                   |  |            |  |         |             |  |
|--|-------------------|--|------------|--|---------|-------------|--|
| No. <b>W 78294</b>   |                   | <b>Due no later than Oct 31, 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SS AUTO, LLC<br>SCOTT W DENNEY<br>1096 N EASTLAND DR STE 200<br>TWIN FALLS ID 83301<br>USA |            | SCOTT DENNEY<br>954 TANGLEWOOD CT<br>TWIN FALLS ID 83301 |         |             |  |
|  |                   |  |            | 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   | DARWIN S BARTLETT | 784 GREENTREE WAY  | TWIN FALLS | ID   | USA     | 83301       |  |
| MEMBER   | SCOTT W DENNEY    | 954 TANGLEWOOD CRT   | TWIN FALLS | ID   | USA     | 83301       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 78294</b>   |                   | 6. Annual Report must be signed.*<br>Signature: Nicole Wilson<br>Name (type or print): Nicole Wilson   |            |  |         |             |  |
| Date: 08/19/2014<br>Title: Bookkeeper  |                   |  |            |  |         |             |  |
| Processed 08/19/2014   |                   | * Electronically provided signatures are accepted as original signatures.  |            |  |         |             |  |