



## Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov Reinstatement fee: \$30.00.

Return completed form to:

Idaho Secretary of State Attn: Reinstatements 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

For Office Use Only

B0823-7255 10/05

## -FILED-

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SOS Control Number: 322252	Filing Status: Inactive-Dissolved (Administrative)		[2]
Limited Liability Company (D)	Date Formed: 06/20/2011	Formation Locale: ID	ω
Name and Mailing Address: SST ENTERPRISES LLC 6711 SAXTON AVE BOISE, ID 83714-7941	(1)	Add or Change Mailing Address:	10:15 AM
Registered Agent (RA) and Registered Offi TODD S SUTPHEN 6711 SAXTON AVE BOISE, ID 83714	ce (RO) Address: (2) Office address must be a physical I	Change RA and/or RO Address:  daho address (no postal box).	Received by
(3) New Registered Agent (RA) Signature:	If a new agent is appointed in item (2	?) above, the new agent must sign here to acce	ept the appointme
(4) Limited Liability Companies: Enter names and These will not be accepted. Changes here will not	addresses of Managers OR Mem affect the entity mailing address.	bers. Do NOT put 'same as last year' If more space is needed, please add	or 'same as a <mark>ը</mark> e'. an attachmen <b>ը</b>
Manager/Member Name	, Business Address	City State Zir	
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(5) Signature:	(6)	Date: 9/2/23	tarı
(7) Type/Print Name: July 5 Sy	tohen (8)	Title: Mys	

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30.00.

Sign and date this form and return to the address provided above.