No. <b>W 92713</b>		Due no later than Apr 30, 2011 Annual Report Form  1. Mailing Address: Correct in this box if needed.  CLIENT SERVICES, LLC  3350 AMERICANA TERRACE STE 340  BOISE ID 83706		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CLIENT SER 3350 AMERI			MICHAEL EISENMAN 1639 S SIMCO RD BOISE ID 83716  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	or Names and Address	sses of at least one Member or Manager.					
Office Held Name	er Names and Addres	Street or PO Address	City	State	Country	Postal Code	
MEMBER MICHA	EL EISENMAN	1639 SIMCO ROAD	BOISE	ID	USA	83716	
5. Organized Under the Laws of:	Organized Under the Laws of:  6. Annual Report must be signed.*						
ID	Signature:	Signature: Michael Eisenman Date: 02/19/2011					
W 92713	Name (type	or print): Michael Eisenman		Title: Member			
Processed 02/19/2011	* Electronically	* Electronically provided signatures are accepted as original signatures.					