No. <b>W 63549</b>			Due no later than Jun 30, 2009	2	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  COMPLETE IT SOLUTIONS LLC DAVID BOCHENEK PO BOX 487			DAVID J BOCHENEK 8475 E CESSNA LN ATHOL ID 83801-0487			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		ATHOL ID 83801-0487 USA  mes and Addresses of at least one Member or Manager.		3	3. <u>New</u> Registered Agent Signature:*			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER MANAGER	DAVID BOCHENEK DANA BOCHENEK		PO BOX 487 PO BOX 487		ATHOL ATHOL	ID ID	USA USA	83801-0487 83801-0487
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: David Bochenek			Date: 07/21/2009			
W 63549		Name (type or print): David Bochenek			Title: Manager			
Processed 07/21/2009		* Electronically	y provided signatures are accepted as origi	inal signat	tures.			