

No. W 63549		Due no later than Jun 30, 2013 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. COMPLETE IT SOLUTIONS LLC DAVID BOCHENEK PO BOX 1011 ATHOL ID 83801 USA		DAVID J BOCHENEK 427 OLD HOUSE RD ATHOL ID 83801			
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 MANAGER	Name DAVID BOCHENEK	Street or PO Address 427 OLD HOUSE RD		City ATHOL	State ID	Country USA	Postal Code 83801-0487
5. Organized Under the Laws of: ID W 63549		6. Annual Report must be signed.* Signature: David Bochenek Name (type or print): David Bochenek Date: 07/24/2013 Title: Owner					
Processed 07/24/2013 * Electronically provided signatures are accepted as original signatures.							