No. <b>W 52362</b>		Due no later than Jul 31, 2017		2. Registered A	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.  CELLULAR BUSINESS SOLUTIONS LLC.  DAVID A THOMPSON  919 MEADOWVIEW DR  NAMPA ID 83651		010 MEADO	DAVID A THOMPSON 919 MEADOWVIEW DR NAMPA ID 83651  3. New Registered Agent Signature:*			
				NAMPA ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	DAVID A TH	HOMPSON	919 MEADOWVIEW DR	NAMPA	ID		83651	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Da		Date: 08/09/2017				
W 52362		Name (type o	r print): David A. Thompson		Title: Manager			
Processed 08/09/2017 * Electronically provided signatures are accepted as original signatures.								