No. <b>W 13179</b>		Due no later than Oct 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  OASIS LEARNING SERVICES, L.L.C. GILLIAN SHARMA 953 N CLEVELAND ST MOSCOW ID 83843		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				GILLIAN SHARMA 953 N CLEVELAND ST MOSCOW ID 83843  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		nes and Addresses of at least one I	Member or Manager				
Office Held	Name		PO Address	City	State	Country	Postal Code
MANAGER GILLIAN SHA		RMA 953 N CL	EVELAND ST	MOSCOW	ID	USA	83843
5. Organized Under the Laws of:  ID  W 13179		6. Annual Report must be signed.* Signature: Gillian Sharma Name (type or print): Gillian Sharma		Date: 08/31/2015 Title: manager			
Processed 08/31/2015 * Electronically provided signatures are accepted as original signatures.							