


W 110388

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No. W 110388	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) RANDY LAWRENCE 3729 N 2300 E FILER ID 83328																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. REAL ESTATE EDUCATION SERVICES, LLC 3729 N 2300 E FILER ID 83328		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Randon Lawrence</td> <td>3729 N. 2300 E., Filer, Id.</td> <td></td> <td>U.S.A.</td> <td></td> <td>83328</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Julene Lawrence</td> <td>3729 N. 2300 E., Filer, Id.</td> <td></td> <td>USA</td> <td></td> <td>83328</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Randon Lawrence	3729 N. 2300 E., Filer, Id.		U.S.A.		83328	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Julene Lawrence	3729 N. 2300 E., Filer, Id.		USA		83328	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 110388		6. Signature: <u></u> Name (type or print): <u>Randon Lawrence</u> Date: <u>9-28-15</u> Title: <u>Manager</u>																																				

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