No. <b>W 55442</b> Return to:		Due no later than Oct 31, 2014  Annual Report Form		2. Registered A	2. Registered Agent and Address (NO PO BOX)  ROBERT G PARKINSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.  EDUCATIONAL MANAGEMENT SYSTEMS, LLC ROBERT G PARKINSON 47 PROFESSIONAL PLAZA REXBURG ID 83440			47 PROFESSIONAL PLAZA REXBURG ID 83440			
				3. New Registered Agent Signature:*				
								4. Limited Liability Co
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	ROBERT G TRACEY D		1042 BARNEY DAIRY RD 1042 BARNEY DAIRY RD	REXBURG REXBURG	ID ID	USA USA	83440 83440	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 55442		Signature: Robert Parkinson			Date: 08/27/2014			
		Name (type or	Title: Member					
Processed 08/27/201	14	* Electronically pr	ovided signatures are accepted as original	signatures.				