

|  |                       |  |  |  |             |  |                      |
|--|-----------------------|--|--|--|-------------|--|----------------------|
| No. <b>W 77451</b>   |                       | <b>Due no later than Sep 30, 2018</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )     |             |  |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                       | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>EDUCATION SOLUTIONS LLC<br>NEIL GOECKNER<br>19179 RED BIRD RD.<br>LEWISTON ID 83501 |  | NEIL GOECKNER<br>19179 RED BIRD RD.<br>LEWISTON ID 83501 |             |  |                      |
|  |                       |  |  |  |             | 3. <u>New</u> Registered Agent Signature:* |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |                       |  |  |  |             |  |                      |
| Office Held<br>MEMBER  | Name<br>NEIL GOECKNER | Street or PO Address<br>19179 RED BIRD RD.   |  | City<br>LEWISTON   | State<br>ID | Country<br>USA                             | Postal Code<br>83501 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 77451</b>   |                       | 6. Annual Report must be signed.*<br><br>Signature: Neil Goeckner<br>Name (type or print): Neil Goeckner<br><br>Date: 07/28/2018<br>Title: President |  |  |             |  |                      |
| Processed 07/28/2018      * Electronically provided signatures are accepted as original signatures.  |                       |  |  |  |             |  |                      |