

No. W 114432		Due no later than May 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. GIVENS EDUCATIONAL SERVICES LLC PO BOX 1794 SANDPOINT ID 83864		MICHAEL G GIVENS 20693 WONDERING PINES RATHDRUM ID 83858			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MIKE GIVENS	20693	RATHDRUM	ID	USA	83858	
5. Organized Under the Laws of: ID W 114432		6. Annual Report must be signed.* Signature: Michael G. Givens Name (type or print): Michael G. Givens					
Date: 04/06/2016		Title: CEO/owner					
Processed 04/06/2016		* Electronically provided signatures are accepted as original signatures.					