

ENTERED

#50950 - a

CERTIFICATE OF APPOINTMENT  
OF REGISTERED AGENT

KNOW ALL MEN BY THESE PRESENTS:

That Area IV Planning & Services Council on Aging Incorporated  
(Name of Corporation)  
an Idaho corporation, pursuant to section 30-1-12, **Idaho Code**, and by authority of its Board of Directors, does  
hereby appoint Phil Sampson, Director Area Agency on Aging, College of Southern Idaho  
(Name of Registered Agent)  
of P.O. Box 1238, Twin Falls, Idaho as its  
(street address) (city)  
Registered Agent in the State of Idaho, upon whom process issued by authority of or under any law of the State of  
Idaho may be served.

IN WITNESS WHEREOF the corporation has caused this certificate to be executed and verified by its  
President (or Vice-President) on this 19th day of June, 19 79.

Area IV PSA Council on Aging Incorporated

(Name of Corporation)

By

Nellie Lerch

(President or Vice-President)

Board Chairperson

(Title)

STATE OF

County of

Idaho  
} ss.  
Twin Falls

Subscribed and sworn to before me this

19th

day of

June

, 19

79.

IN WITNESS WHEREOF, I have hereunto set my hand and  
affixed my seal.

Patsie Libert

Notary Public

(Title)