## FILED PERSONNE

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UNINCORPORATED NONPROPIT ASSOCIATION APPOINTMENT OF AGENT FOR SERVICE OF PROCESS To the Secretary of State of the State of Idaho: Kuna 2. The principal address of the nonprofit association is 3. The name and street address of the agent authorized to receive service of process for the association are date howe for Box 145 565 Linder Kuna Id Signature of agent: \_\_ Dated 7-18.03 Secretary of State use only Signature of a manager of the nonprofit association: