C	HANGE OR TER	SERVICE OF PROCESS	SECRE SEY OF STATE
To the Secretary of State of the State	e of Idaho:	Assoc. # <u>U 13</u>	7 SAILE OF IDAHO"
1. The current name of the nonprof		wer District	_
2. The new name of the nonprofit a	ssociation is:		
3. The address of the nonprofit ass		Check box If address is an add	-
4. The name of the current registere	_		
5. The name of the new registered	agent is:		:
6. The physical address of the new	registered agent is:		
I consent to serve as registere	d agent for the above	e-named entity.	
(Signature of new registered agent)			
By checking this box, the associated no longer active.	ation is terminating the	e registered agent because the	association is
Signature of a member of the nonpro	fit association:		
Mall to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080		Secretary of State uses 1940. On 301701 personal secretary of State uses 1940. On 3017	se only
NO FEE REQUIRED	FILE ONE COPY	<u>ទ</u> ទ	