

FILED EFFECTIVE

UNINCORPORATED NONPROFIT ASSOCIATION  
CHANGE OR TERMINATION  
OF REGISTERED AGENT FOR SERVICE OF PROCESS  
REGISTRATION OF STATE

To the Secretary of State of the State of Idaho:

1. The current name of the nonprofit association is:

## Harvesting Helping Hands Garden

2. The new name of the nonprofit association is:

3. The address of the nonprofit association is:

Check box if address is an address change.

**4. The name of the current registered agent is:**

5. The name of the new registered agent is:

6. The physical address of the new registered agent is:

I consent to serve as registered agent for the above-named entity.

(Signature of new registered agent)

By checking this box, the association is terminating the registered agent because the association is no longer active.

**Signature of a member of the nonprofit association:**

Jadynne Fletcher  
Dated: November 18, 2009

**Mail to:**  
Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

**Secretary of State use only**

**NO FEE REQUIRED**

**FILE ONE COPY**