EFFECTIVETATEMENT OF CHANGE OF REGISTERED OFFICE

| FILED EFFECTIVE TATEMENT OF CHANGE OF REGISTERED AGENT, OR BOTH |
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| The undersigned entity submits the following statement for the purpose of changing its registered office or its registered agent, or both, in the State of Idaho. 1. The name of the entity is: Credit Bureau of Shoshone County, Inc. dba Shoshone Adjustment Bureau |
| 2. The street address of its present registered office is: 404 W Cameron Ave. Kellogg Idaho 83837 |
| 3. The street address (not a P.O. box) to which its registered office is to be changed is: no change |
| 4. The name of its old registered agent is: Jim C. Best 5. The name of its new registered agent is: Cynthia M. Best 6. The address of the registered office and the business address of the registered agent are identical. |
| Dated: 5-15-03 Signed: |
| I consent to serve as registered agent Capacity: President for the above-named entity. (See reverse for instructions) |