STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

View 7To the secretary of State of the State of Idaho:

| Pursuant to the provisions of the Idaho Business | |
|--|---|
| organized under the laws of the State of | gent, or both, in the State of Idaho. |
| 1. The name of the corporation is | oration |
| 2. The street or RFD address of its present registered office | |
| 3. The street or RFD address to which its registered office is | to be changed is |
| 3784 Lancer Way N 4. The name of its old registered agent is Tom 7 | Peridian, Id. 83642 |
| 4. The name of its old registered agent is | Allegrezza |
| 5. The name of its new registered agent is | |
| 6. The address of the registered office and the business a | |
| 7. The foregoing change was authorized by resolution of | the board of directors. |
| Dated | 19 |
| | |
| Ву | T. (1662) |
| Ω_{A} | ItsPresident |
| STATE OF STA | |
| COUNTY OF A CULA) | |
| 1, Paula D. Shottif a | notary public, do hereby certify that on this |
| day of | , 19 8/ , personally appeared |
| before me Jon I allegrage | , who being by me first duly sworn |
| declared that he is the | of Ma Corporation |
| , ———————————————————————————————————— | |
| that he signed the foregoing document as | dent of the corporation and |
| that the statements therein contained are true. | for a lead |
| | Notary Public |

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