FILED EFFECTIVE

UNINCORPORATED NONPROFIT ASSOCIATION 2012 SEP 27 AM 8: 57 APPOINTMENT OF AGENT FOR SERVICE OF PROCESS SECRETARY OF STATE To the Secretary of State of the State of Idaho: 1. The name of the nonprofit association is: The name of the nonprofit association is: TROW WARRIORS SNAKE RIVER CHAPTER The principal address of the nonprofit association is: TO ANALL LIAL TRUIN FALLS IN \$33 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: (Registered agent must be located at a street address in Idaho -- PO, PMB, and addresses outside Idaho are not acceptable.) Signature of agent: Dated Signature of a member of the nonprofit association: Dated: Secretary of State use only

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