FILED EFFECTIVE

UNINCORPORATED NONPROFIT ASSOCIATION APPOINTMENT OF AGENT FOR SERVICE OF PROCESS

2015 JAN -2 AN #: 53

To the Secretary of State of the State of Idaho:

1.	The name of the nonprofit association is:	
	_	

Soroptionist International of Pocatello

2. The principal address of the nonprofit association is:

1509 Partridge Cove Pocatello, ID 83202

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: 1-1.8 C) Dated___ Signature of a member of the nonprofit association (X Dated: _____

Secretary of State use only

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