

STATEMENT OF CHANGE, RESIGNATION OR TERMINATION BY COMMERCIAL REGISTERED AGENT

(see reverse for instructions)

The person identified below submits to the Secretary of State the following statement for the purpose of changing its commercial registered agent information on file with the Secretary of State.

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The name of the commercial registered agent is:		
BUSINESS FILINGS INCO	DRPORATE	ED
The address of the commercial registered agent current	ntly on file is	3:
921 S Orchard Street	, Suite G	
Information on file that is to be changed:		
The name or address of the agent has changed. T	he new nan	ne / address is:
1555 W. Shoreline Drive, Suite	100, Boise	e, ID 83702
The type or jurisdiction of organization of the agen	t has chang	ed. The new type or jurisdiction is:
The agent resigns from serving as agent for service	e of process	s for the entity listed below:
	o or process	or the driving holds bolow.
and the name and address of the person to which entity:	the agent w	rill send notice at the represented
The agent is no longer in the business of serving as termination will take effect on the thirty-first day aff Secretary of State's office.		
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	13	