UNINCORPORATED NONPROFIT ASSOCIATION CHANGE OR TERMINATION OF REGISTERED AGENT FOR SERVICE OF PROCESS

2014 FEB 24 AM 9: 21

		SECRETARY OF STATE OF ID	ST
To the Secretary of State of th	e State of Idaho:		, 1010
1. The current name of the nam	ionprofit association is: Aent Nurs	Association	- -
2. The new name of the non	profit association is:		
3. The address of the nonpro	ofit association is:	Check box if address is an address change.	-
I. The name of the current r		DUBGIO ODIP	-
. The name of the new regi	stered agent is:		-
. The physical address of the	ne new registered agent is	is:	-
I consent to serve as re	gistered agent for the abo	ove-named entity.	-
	- '	g the registered agent because the association	is
no longer active.			
Signature of a member of the Caron VIII	nonprofit association:		
Dated:		Secretary of State use only	
Mail to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080		coopyformstunine_np_chg_lerm_re_pmd Revised 10/2000	
FEE REQUIRED	FILE ONE COPY	lä	