UNINCORPORATED NONPROFIT ASSOCIATIO TO PH 2: 58 APPOINTMENT OF AGENT FOR SERVICE OF PROCESS

SECRETARY OF STATE

| Assoc. # <u>U 162</u> 6 | <u> </u> |
|---|-------------------|
| (Assigned by the Secretary of State Offi | ice) |
| To the Secretary of State of the State of Idaho: | |
| 1. The name of the nonprofit association is: 1. The name of the nonprofit association is: 1. The name of the nonprofit association is: | |
| South Lemhi School District \$292 | |
| 2. The principal address of the nonprofit association is: | |
| 1115 3rd Street P.O. Box 119 Leadure, Id 8 | 3464 |
| 3. The name and street address of the agent authorized to receive service of process for the as are: (Registered agent must be located at a street address in Idaho – PO, PMB, and addresses outside Idaho acceptable.) | |
| 123 Silver St, Leadore ID 83464 | |
| 123 Silver St, Leadore ID 83464 DR. Sandra Noland | |
| Signature of agent: And Sur Prolent | . · · |
| Dated 12-1-09 | |
| Signature of a member of the nonprofit association: Dena Shines - Clerk | <u>.</u> |
| Dated: 12-1-09 | |
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| Mail to: Secretary of State use only | |
| Idaho Secretary of State 450 N 4th Street PO Box 83720 | fr and the second |

NO FEE REQUIRED

Boise ID 83720-0080

FILE ONE COPY