22167/

CERTIFICATE OF APPOINTMENT OF REGISTERED AGENT



KNOW ALL MEN BY THESE PRESENTS: MEDICAL SERVICE BUREAU OF IDAHO, ENGLISHED (Name of Corporation) an Idaho corporation, pursuant to section 30-1-12, Idaho Code, and by authority of its Board of Directors, does WAYNE OLIN hereby appoint __ (Name of Registered Agent) 1602 21st Avenue Lewiston __ Idaho as its (street address) Registered Agent in the State of Idaho, upon whom process issued by authority of or under any law of the State of Idaho may be served. IN WITNESS WHEREOF the corporation has caused this certificate to be executed and verified by its 10th President (or Vice-President) on this ___ _day of _ MEDICAL SERVICE BUREAU OF IDAHO. INC. (Bresident or Vice-President) PRESIDENT (Title) day of _______, 19 79. Subscribed and sworn to before me this ___ IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal.