FILED EFFECTIVE

08 JUN -9 AM 8: 53

SECRETARY OF STATE STATE OF IDAHO

UNINCORPORATED NONPROFIT ASSOCIATION APPOINTMENT OF AGENT FOR SERVICE OF PROCESS	
To the Secretary of State of the State of Idaho:	Assoc. # W12007
1. The name of the nonprofit association is: Disclude an luces Strains auxiliary Initials 2. The principal address of the nonprofit association is: 106 Strains Strains Strains Strains 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 2. The name and street address of the agent authorized to receive service of process for the association are: 3. The name and street address of the agent authorized to receive service of process for the agent authorized are also an accordance and a street address of the agent authorized to receive service of process for the agent authorized to receive service of process for the agent authorized to receive service of process for the agent authorized to receive service of process for the agent authorized to receive service and accordance are also an accordance and accordance are also an accordance an	
Dated 06/05/08	Secretary of State use only
Signature of a manager of the nonprofit association:	
Mail to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	

FILE ONE COPY

NOFEEREQUIRED