OTO the Secretary of	UNINCORPORATED NONPRO APPOINTMENT OF AGENT FOR S	
To the Secretary of	f State of the State of Idaho:	Assoc. # <u>U 4</u> 7
1. The name of the	nonprofit association is _P.A.C.E. Pare	nts Organization
<u>40 Linden Par</u> 3. The name and s	street address of the agent authorized to recei	
Karla	Lacrange: 1305 9th 5	treet; Iclance Fulls, 1D
Signature of age	nt: <u>Raila Fallange</u>	
Dated 12/20/0	3	Secretary of State use only
Dated <u>12/19/C</u>		Secretary of State use only

★ FILEONECOPY

✤ NOFEEREQUIRED