

## STATEMENT OF CHANGE OF REGISTERED AGENT, REGISTERED OFFICE, OR BOTH

(See reverse for instructions)

2016 AUG 3 AM 11: 45

SECRETARY OF STATE STATE OF IDAHO

File#: <u>C203364</u>

The	e undersigned entity submits the following statement for the purpose of changing its registered ent, its registered office, or both, in the State of Idaho.
1.	The name of the entity is:  CGA Academy Foundation, Inc
2.	The name and street address of the <u>old</u> registered agent and office is:  JEFF EDWARDS
	862 RANDY DRIVE IDAHO FALLS IDAHO 83401
3.	The name and street address of the <u>new</u> registered agent and office in Idaho is:  CARLOS ELIZONDO
	135 E 25TH IDAHO FALLS IDAHO 83404 (not a PO box or PMB)
	I consent to serve as registered agent for the above-named entity.  (Signature of new registered agent)  7/29/2016
	(Date)
	Signature MICHELLE ROAN  Capacity: OFFICER
	NO FEE REQUIRED