



**UNINCORPORATED NONPROFIT ASSOCIATION
CHANGE OR TERMINATION OF REGISTERED AGENT
FOR SERVICE OF PROCESS**

Base Filing fee: \$30.00 + \$20.00 for manual processing (form must be typed).

To the Secretary of State of the State of Idaho:

Assoc. # _____

1. The current name of the nonprofit association is:

2. The new name of the nonprofit association is:

3. The address of the nonprofit association is:

Check box if address is an address change.

4. The name of the current registered agent is:

5. The name of the new registered agent is:

6. The physical address of the new registered agent is:

I consent to serve as registered agent for the above-named entity.

(Signature of new registered agent)

By checking this box, the association is terminating the registered agent because the association is no longer active.

Signature of a member of the nonprofit association: _____

Dated: _____
(mm/dd/yyyy)

Mail or deliver to:

Office of the Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

FILE ONE COPY

Secretary of State use only