



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

10 AUG 18 PM 2:09

SECRETARY OF STATE  
STATE OF IDAHO

The undersigned partnership hereby files a statement of partnership authority, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-303.

Ecstatic Earth

1. The name of the partnership is: \_\_\_\_\_

12584 W Norristown St Boise, ID 83709

2. The street address of its chief executive office is: \_\_\_\_\_

12584 W Norristown St Boise, ID 83709

3. The street address of one (1) office in Idaho: \_\_\_\_\_

4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
Leora House	12584 W Norristown St Boise, ID 83709
Kimberly Lange	12584 W Norristown St Boise, ID 83709
Carol Lange	23922 Howe Rd Caldwell, ID 83607

OR the name and address of the agent in Idaho who maintains a list of all partners:

5. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

Leora House	_____	_____
Kimberly Lange	_____	_____
Carol Lange	_____	_____

6. Signature of at least 2 partners:

1) Leora House

Typed Name Leora House

2) Kimberly Lange

Typed Name Kimberly Lange

3)

Typed Name \_\_\_\_\_

Secretary of State use only

1000forms/0401/partnership.pdf  
RevAUG2010

Web Form

IDAHO SECRETARY OF STATE  
08/18/2010 05:00  
CK: 769 CT: 250515 BH: 1235331  
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