



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE
2007 JAN 10 AM 9:11

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.

1. The name of the partnership is: Twin Falls Infill Joint Venture Enterprises
2. The street address of its chief executive office is: 808 Eastland Drive South, #D, Twin Falls, Id
3. The street address of one (1) office in Idaho: 808 Eastland Drive South, #D, Twin Falls Idaho

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

Name	Address
<u>DeVore and Associates, LLC</u>	<u>4128 Meadow Ridge Circle, Twin Falls, Idaho 83301</u>
<u>Renaldi Construction, Inc.</u>	<u>808 S. Eastland Drive South, Suite D, Twin Falls, ID 83301</u>

OR the name and address of the registered agent in Idaho is:

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

Leland R. DeVore

James Renaldi

6. Signature of at least 2 partners:

1)

Leland R. DeVore

2)

James Renaldi

3)

12-20-06
Typed Name

Secretary of State use only

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Revised 01/2001

Web Form

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01/10/2007 05:00
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