

STATEMENT OF PARTNERSHIP **AUTHORITY**

(Instructions on back of application)

FILEDEFFECTIVE 2033 STP 20 All 9: 02

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.

	The name of the partnership is	S:
2.	The street address of its chief	executive office is: 3835 North 1300 East, Buhl, Idaho 83316
3.	The street address of one (1) o	office in Idaho: 3735 North 1300 East, Buhl, Idaho 83316
4.	The names and mailing address	sses of all partners (attached sheets may be added):
	Name JOE E. AVELAR	Address 3835 North 1300 East, Buhl, Idaho 83316
	ANTONIO G. AVELAR	3835 North 1300 East, Buhl, Idaho 83316
	ANTONIO F. AVELAR	3835 North 1300 East, Buhl, Idaho 83316
		he registered agent in Idaho is:
5. hel		norized to execute an instrument transferring real property
5. hel	The names of the partners auth	Dorized to execute an in-turn of
5. hel	The names of the partners auth in the name of the partnership JOE E. AVELAR	norized to execute an instrument transferring real property
6. \$	The names of the partners auth in the name of the partnership JOE E. AVELAR ANTONIO G. AVELAR	norized to execute an instrument transferring real property (All 3 signatures required.) Secretary of State use only

108.00 PARTH AUT # 2

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