

STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

2015 AUG 17 -AM-10: 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.

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The name of the partnership is	S & M STORAGE S:
The street address of its chief	1038 KENNEDY FORD BOAD
POTLATCH, IDAHO 83855	
	1040 BOLLER ROAD #3
The street address of one (1)	office in Idaho:
POTLATCH, IDAHO 83855	
The names and mailing addre	sses of all partners (attached sheets may be added):
Name	Address
STEVEN J WOLHETER	1028 KENNEDY FORD ROAD, POTLATCH, ID 83855
MICHAEL D BOLLER	1040 BOLLER ROAD #3, POTLATCH, ID 83855
7/1 2	
The names of the partners au eld in the name of the partnersh STEVEN J WOLHETER	thorized to execute an instrument transferring real propert iip:
MICHAEL & BOLLER	
6. Signature of at least 2 partner	'S:
1) Stolet	Secretary of State use only
Typed Name STEVEN J WOLHE	TER IDAHO SECRETARY OF STA
2) not Soll	
Typed Name MICHAEL & BOLLE	IDAHO SECRETARY OF STA 08/17/2015 05:0 R
3)	ogdosa a 200 . 300 - 100 . 221(11
Typed Name	5
	Web Form

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