



STATEMENT OF PARTNERSHIP FILED EFFECTIVE AUTHORITY

(Instructions on back of application) 2012 SEP -4 AM 9:39

SECRETARY OF STATE

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: Coleman Estates
- The street address of its chief executive office is: 1160 W. Highway 39,
Blackfoot, Idaho 83221
- The street address of one (1) office in Idaho: 1160 W. Highway 39,
Blackfoot, Idaho 83221
- The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Guy L. Walker</u>	<u>1160 W. Highway 39, Blackfoot, Idaho 83221</u>
<u>Joan G. Coleman Walker</u>	<u>1160 W. Highway 39, Blackfoot, Idaho 83221</u>

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

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

<u>Guy L. Walker</u>	_____	_____
<u>Joan G. Coleman Walker</u>	_____	_____
_____	_____	_____

- Signature of at least 2 partners:

1)
Typed Name Guy L. Walker

2)
Typed Name Joan G. Coleman Walker

3) _____
Typed Name _____

Secretary of State use only

d:\corporate\forms\partnership\auth.pdf Revised 06/2002

Web Form

IDAHO SECRETARY OF STATE
09/04/2012 05:00
CK: 1283 CT: 254339 BH: 1338367
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