



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

08 JUL 10 AM 8:28

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.

- The name of the partnership is: WESTMONT PARTNERSHIP
- The street address of its chief executive office is: 312 MAIN STREET
COTTONWOOD, ID 83522
- The street address of one (1) office in Idaho: 312 MAIN STREET
COTTONWOOD, ID 83522

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

Name	Address
<u>MICHAEL G WESTHOFF</u>	<u>834 COTTONWOOD BUTTE RD, COTTONWOOD, ID</u>
<u>STEPHEN G LAMONT</u>	<u>303 MAIN STREET, COTTONWOOD, ID 83522</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:

MICHAEL G WESTHOFF

STEPHEN G LAMONT

- Signature of at least 2 partners:

1) Michael G Westhoff

Typed Name MICHAEL G WESTHOFF

2) Stephen G Lamont

Typed Name STEPHEN G LAMONT

3) _____

Typed Name _____

Secretary of State use only

IDAHO SECRETARY OF STATE
07/10/2008 05:00
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Revised 08/2002

Web Form

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