



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2006 FEB -6 AM 9:34

SECRETARY OF STATE
STATE OF IDAHO
Correction

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: Vand M Masonry Vand M Masonry
- The street address of its chief executive office is: 112 N Cambie St
Post Falls ID 83854
- The street address of one (1) office in Idaho: _____
- The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>James S. Vigrinec</u>	<u>112 N. Cambie St. Post Falls ID 83854</u>
<u>Reginald Moore</u>	<u>1614 E. 3rd #3 Post Falls ID 83854</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:

<u>James S. Vigrinec</u>	_____	_____
<u>Reginald Moore</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

- James S. Vigrinec
Typed Name James S Vigrinec
- Reginald Moore
Typed Name REGINALD MOORE
- _____
Typed Name _____

Secretary of State use only

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Revised 01/2001

IDAHO SECRETARY OF STATE
02/06/2006 05:00
CK: 1117 CT: 196072 BH: 936112
1 @ 100.00 = 100.00 PARTN AUT # 2
1 @ 20.00 = 20.00 CORP SUR # 3

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