



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

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MAY 22 2002

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.

1. The name of the partnership is: Jackson Brother's Concrete

2. The street address of its chief executive office is: 420 Wilson DR. Idaho Falls
ID. 83401

3. The street address of one (1) office in Idaho: 10314 N 85 E Idaho Falls, ID. 83401

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

Name	Address
<u>Kelly Jackson</u>	<u>420 Wilson DR. Idaho Falls ID. 83401</u>
<u>Jim Jackson</u>	<u>10314 N 85 E Idaho Falls, ID. 83401</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>Kelly Jackson</u>	<u>Jim Jackson</u>	

6. Signature of at least 2 partners:

1) Kelly Jackson

Typed Name Kelly Jackson

2) Jim Jackson

Typed Name Jim Jackson

3) _____

Typed Name _____

Secretary of State use only

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Revised 01/2001

IDaho SECRETARY OF STATE
08/22/2002 05:00
CK: 1009 CT: 162549 DH: 404169
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