FILED EFFECTIVE

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STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2010 FEB -8 PM 4: 26

SEURETARY 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. | |
|---|---|
| 1. The name of the partnership is: | JW Tool Works |
| | executive office is: 2440 E Timberland Dr, Eagle, ID 83616 |
| . The street address of one (1) or | ffice in Idaho: 2440 E Timberland Dr. Eagle, ID 83616 |
| . The names and mailing addres Name Grant H Walton | ses of all partners (attached sheets may be added): Address PO Box 308, Stites, ID 83552 |
| Joe Williams | PO Box 308, Stites, ID 83552 |
| | ne agent in Idaho who maintains a list of all partners: horized to execute an instrument transferring real property p: |
| Joe Williams | |
| | |
| 6. Signature of at least 2 partners 1) | Secretary of State use only |
| Typed Name | IDAHO SECRETARY OF STATE 92/09/2010 05 CX: 383866 CT: 172899 BH: 12 |