



**STATEMENT OF PARTNERSHIP  
AUTHORITY**

**(Instructions on back of application)**

11 OCT 24 AM 9:49

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.

1. The name of the partnership is: Imelda's Restaurant

2. The street address of its chief executive office is: 15385 Lavin St., Caldwell ID 83605

3. The street address of one (1) office in Idaho: 15385 Lavin St., Caldwell ID 83605

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

Name	Address
Imelda Soto	15385 Lavin St., Caldwell ID 83605
Salvador Soto	15385 Lavin St., Caldwell ID 83605

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

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

Imelda Soto

**Salvador Soto**

**6. Signature of at least 2 partners:**

Emilia Soto

Typed Name Imelda Soto

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Typed Name Salvador Soto

3) Silvadecata

Typed Name

Secretary of State use only

સાધુબાબુની પ્રાચીન માનવસત્તુની પ્રેરણ

IDaho SECRETARY OF STATE  
10/24/2011 05:00  
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