

FILED EFFECTIVE

246



STATEMENT OF PARTNERSHIP AUTHORITY

2005 JUN 16 PM 2:08

(Instructions on back of application)

 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: EAGLEYE
2. The street address of its chief executive office is: _____
2400 FLAT CREEK RD
3. The street address of one (1) office in Idaho: _____
2400 FLAT CREEK RD

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

Name	Address
<u>ACE MARTIN & LAURIE MARTIN</u>	<u>2400 FLAT CREEK RD, ST. MARIES, IDAHO 83861</u>
<u>BILL NAGLE & SANDY NAGLE</u>	<u>1616 SHEPHERD RD, ST. MARIES, IDAHO 83861</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>ACE MARTIN</u>	<u>SANDY NAGLE</u>	_____
<u>LAURIE MARTIN</u>	_____	_____
<u>BILL NAGLE</u>	_____	_____

6. Signature of at least 2 partners:

1) *Sandy Nagle*
Typed Name SANDY NAGLE

2) *Bill Nagle*
Typed Name BILL NAGLE

3) _____
Typed Name _____

Secretary of State use only

g:\corp\forms\partnership\auth.p65

Revised 01/2001

Web Form

 IDAHO SECRETARY OF STATE
06/16/2005 05:00
CK: 554418 CT: 172099 BH: 816471
1 @ 100.00 = 100.00 PARTN AUT # 2

K 280