



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

2006 AUG 28 AM 10: 04

The undersigned partnership hereby files a statement of partnership authority, and submits the following information to the Secretary of State pursuant to Idaho Code § 55-8-309.

1. The name of the partnership is: DAVE'S DRYWALL

2. The street address of its chief executive office is: \_\_\_\_\_

1842 TETON VIEW DRIVE - REXBURG ID 83440.

3. The street address of one (1) office in Idaho: \_\_\_\_\_

SAME

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

Name	Address
<u>DAVID WINEGAR</u>	<u>1842 TETON VIEW DRIVE - REXBURG ID 83440</u>
<u>ALVIN WINEGAR</u>	<u>1842 TETON VIEW DRIVE - REXBURG ID 83440</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>DAVID WINEGAR</u>	_____	_____
<u>ALVIN WINEGAR</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) *David Winegar*  
Typed Name DAVID WINEGAR

2) *Alvin Winegar*  
Typed Name ALVIN WINEGAR

3) \_\_\_\_\_  
Typed Name \_\_\_\_\_

Secretary of State use only

g:\corp\forms\partnership\auth.pdf  
Revised 01/2001

IDAHO SECRETARY OF STATE  
08/29/2006 05:00  
CK: 13496 CT: 71989 BH: 972398  
1 @ 100.00 = 100.00 PARTN AUT # 2

R 400