Typed Name

STATEMENT OF PARTNERSHIP AUTHORITY

FILED EFFECTIVE

(Instructions on back of application)

2001 OCT 22 PM 1: 20

SECRETARY OF STATE

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.

ne street address of its d	nief executive office is: 10894 N Magic et Hayden, ID 83835
he street address of one	(1) office in Idaho: 10894 N Magic ct Hayden, ID 83835
The names and mailing ad	idresses of all partners (attached sheets may be added):
Name Jennifer Brown	Address 10894 N Magic ct Hayden, ID 83835
Jeffrey Silva jr	10894 N Magic ct Hayden, ID 83835
	s of the registered agent in Idaho is:
The names of the partners	s authorized to execute an instrument transferring real prop
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IDAHO SECRETARY OF STATE

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