



STATEMENT OF PARTNERSHIP FILED EFFECTIVE AUTHORITY

(Instructions on back of application)

2005 NOV 21 AM 8:56

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: Advantage IT Services
2. The street address of its chief executive office is: 623 Colton St New Plymouth, ID 83655
3. The street address of one (1) office in Idaho: 623 Colton St New Plymouth, ID 83655
4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Nathan Owen</u>	<u>751 W Chestnut St Genesee, ID 83832</u>
<u>Boone Osborn</u>	<u>623 Colton St New Plymouth, ID 83655</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>Boone Osborn</u>	_____	_____
<u>Nathan Owen</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) *Boone Osborn*
 Typed Name Boone Osborn

2) *Nathan Owen*
 Typed Name Nathan Owen

3) _____
 Typed Name _____

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

Secretary of State use only

IDAHO SECRETARY OF STATE
 11/21/2005 05:00
 CK: 1172 CT: 194329 BH: 923052
 1 @ 100.00 = 100.00 PARTN AUT # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3

K 313