



# STATEMENT OF PARTNERSHIP FILED EFFECTIVE AUTHORITY

(Instructions on back of application)

05 SEP 28 AM 10:56

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: Hoke Partnership
2. The street address of its chief executive office is: 1636 N. Dunsmuir Way, Eagle, Idaho 83616
3. The street address of one (1) office in Idaho: 1636 N. Dunsmuir Way, Eagle, Idaho 83616

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

| Name                         | Address                                       |
|------------------------------|---|
| <u>Steve R. Hoke</u>         | <u>1636 N. Dunsmuir Way, Eagle, ID. 83616</u> |
| <u>Jan L. Hoke</u>           | <u>9436 W. Java Ct., Boise, ID. 83704</u>     |
| <u>Elaine Hoke Patterson</u> | <u>4887 Lakes Edge Pl., Boise, ID. 83703</u>  |

OR the name and address of the registered agent in Idaho is:

na na

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

|                      |         |         |
|----------------------|---------|---------|
| <u>Steve R. Hoke</u> | <u></u> | <u></u> |
| <u>Jan L. Hoke</u>   | <u></u> | <u></u> |
| <u></u>              | <u></u> | <u></u> |

6. Signature of at least 2 partners:

- 1) [Signature: Steve R. Hoke] 9/28/05  
Typed Name Steve R. Hoke
- 2) [Signature: Jan L. Hoke] 9/28/05  
Typed Name Jan L. Hoke
- 3)   
Typed Name

g:\corp\forms\partnershipauth.p65

Revised 01/2001

Auth. Form

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/28/2005 05:00  
CK: 7984 CT: 192702 DH: 913995  
1 @ 100.00 = 100.00 PARTN AUT # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

K 302