



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2009 MAR 30 PM 1:34

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: FROG VILLAGE
2. The street address of its chief executive office is: \_\_\_\_\_  
1725 NO CURTIS RD, BOISE, ID 83706
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>ANITA E. LEATHAM</u>	<u>1725 NO CURTIS RD, BOISE, ID 83706</u>
<u>DALE D. LEATHAM</u>	<u>1725 NO CURTIS RD, BOISE, ID 83706</u>

OR the name and address of the agent in Idaho who maintains a list of all partners:

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

<u>ANITA E. LEATHAM</u>	_____	_____
<u>DALE D. LEATHAM</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) Anita E. Leatham  
Typed Name Anita E. Leatham

2) Dale D. Leatham  
Typed Name Dale D. Leatham

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

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/30/2009 05:00  
CK: 1604 CT: 235621 BH: 1163618  
1 @ 100.00 = 100.00 PARTIAL AUT # 2

g:\corpforms\forms\partnershipauth.ps5 Revised 09/2002 Web Form

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