



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

**FILED EFFECTIVE**

09 APR 20 AM 9:25

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: Rowland Farms Partnership

2. The street address of its chief executive office is: 1143 Rowland Road  
Pocatello, ID 83204

3. The street address of one (1) office in Idaho: 1143 Rowland Road  
Pocatello, ID 83204

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

Name	Address
_____	_____
_____	_____
_____	_____

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

Bob Rowland 1141 Rowland Road, Pocatello, ID 83204

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

<u>Andy Rowland</u>	_____	_____
<u>Beth Rowland</u>	_____	_____
<u>Bob Rowland</u>	_____	_____

6. Signature of at least 2 partners:

- 1) *Bob Rowland*  
Typed Name Bob Rowland
- 2) *Andy Rowland*  
Typed Name Andy Rowland
- 3) \_\_\_\_\_  
Typed Name \_\_\_\_\_

Secretary of State use only

g:\corp\forms\partnershipauth.pdf  
Revised 09/2002

IDAHO SECRETARY OF STATE  
04/20/2009 05:00  
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Web Form

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