

Typed Name

STATEMENT OF PARTNERSHIP **AUTHORITY**

SECRETARY OF STATE STATE OF IDAHO

2016 AUG 19 AM 8: 59

(Instructions on back of application)

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. The name of the partnership is:

Mavens of the Market - Investment Club 2. The street address of its chief executive office is: _____ 83814 3. The street address of one (1) office in Idaho: 2827 W Timberlake Lp, Coeur d' Alene ID 83815 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: Dixie Reid 1144 Lambert Lane, Coeur d' Alene, ID 83814 5. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership: Dixie Reid Janine Wilson 6. Signature of at least 2 partners: Secretary of State use only Typed Name Dixie Reid IDAHO SECRETARY OF STATE 08/19/2016 05:00 CK:737 CT:328047 BH:1542642 Typed Name Janine Wilson 16 100.00 = 100.00 PARTN AUT #2 121398