



# STATEMENT OF PARTNERSHIP AUTHORITY

## FILED EFFECTIVE

(Instructions on back of application)

2018 SEP 12 AM 8:59

SECRETARY OF STATE

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: MERAKI ART
- The street address of its chief executive office is: 20 BUTLER DRIVE  
ST MARIES, ID 83861
- The street address of one (1) office in Idaho: 732 COLLEGE AVE  
ST MARIES, ID 83861

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

Name	Address
<u>REVA NELSON</u>	<u>20 BUTLER DR, ST MARIES ID 83861</u>
<u>MALLORY LEHMAN</u>	<u>351 CANYON VIEW DRIVE, ST MARIES ID 83861</u>

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

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

<u>REVA NELSON</u>	<u></u>	<u></u>
<u>MALLORY LEHMAN</u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>

- Signature of at least 2 partners:

1) *Reva Nelson*

Typed Name REVA NELSON

2) *Mallory Lehman*

Typed Name MALLORY LEHMAN

3)

Typed Name

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Revised 09/2002

Secretary of State use only  
IDAHO SECRETARY OF STATE

09/12/2018 05:00

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