

STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2005 SEP 23 KIT 9: 03

	SECHENZE OF SIME
The undersigned partnership hereby files a statement the following information to the Secretary of State	ent of partnership authority, and submits pursuant to Idaho Code § 53-3-303.
1. The name of the partnership is:	nial Service.
2. The street address of its chief executive office is	s:616 16th Ave. South
Nampa, ID 83651	·
3. The street address of one (1) office in Idaho: _	
616 16th Ave. South Nampa, ID	83651
4. The names and mailing addresses of all partners Name Address Inma Rodniquez 6/6 /6th Ave. Mania Beltnam 6/6 /6th Ave. Mania Fuentes 6/6 /6th Ave. OR the name and address of the registered age. 5. The names of the partners authorized to execute	S. Nampa. ID 83651 S. Nampa, ID 83651 S. Nampa, ID 83651 gent in Idaho is:
held in the name of the partnership: Irma Rodniguez Mania Beltm	ji
6. Signature of at least 2 partners:	
1) a Jama Rodriguz	Secretary of State use only
Typed Name Inna Rodniquez 2) Moria & Bellson	ishpeul);
Typed Name Maria Beltran	- Local Part
3) Maria frester	LN: CO/3 UI: 175300 BH: 713674
Typed Name Maria Fuentes	점

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