



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

2007 MAR 12 AM 10:13

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.

1. The name of the partnership is: Society Socks

2. The street address of its chief executive office is: 1102 Orchard Avenue

Moscow ID 83843

3. The street address of one (1) office in Idaho: 1102 Orchard Avenue

Moscow ID 83843

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

Name	Address
<u>Mary Jo Hamilton</u>	<u>1102 Orchard Avenue, Moscow ID 83843</u>
<u>Lida Saskova</u>	<u>1080 Deer Road, Deary ID 83823</u>
_____	_____

OR the name and address of the registered agent in Idaho is:

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

<u>Mary Jo Hamilton</u>	_____	_____
<u>Lida Saskova</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) Mary Jo Hamilton

Typed Name Mary Jo Hamilton

2) Lida Saskova

Typed Name Lida Saskova

3) _____

Typed Name _____

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Revised 01/2001

Secretary of State use only

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03/12/2007 05:00
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