



STATEMENT OF PARTNERSHIP FILED EFFECTIVE AUTHORITY

(Instructions on back of application)

08 JUN 20 AM 9:33

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.

- The name of the partnership is: JWG FAMILY PARTNERSHIP
- The street address of its chief executive office is: 586 SHEPHERD RD
ST MARIES ID 83861
- The street address of one (1) office in Idaho: 586 SHEPHERD RD
ST MARIES ID 83861
- The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>JERRY A WEMHOFF</u>	<u>P O BOX 446 ST MARIES ID 83861</u>
<u>WILLIAM L WEMHOFF</u>	<u>905 COLLEGE AVE ST MARIES ID 83861</u>
<u>GAYLE A WEMHOFF</u>	<u>1945 CENTER AVE 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>JERRY A WEMHOFF</u>	_____	_____
<u>WILLIAM L WEMHOFF</u>	_____	_____
<u>GAYLE A WEMHOFF</u>	_____	_____

- Signature of at least 2 partners:

1) <u>Jerry A Wemhoff</u>	_____
Typed Name <u>JERRY A WEMHOFF</u>	_____
2) <u>William L Wemhoff</u>	_____
Typed Name <u>WILLIAM L WEMHOFF</u>	_____
3) <u>Gayle Wemhoff</u>	_____
Typed Name <u>GAYLE A WEMHOFF</u>	_____

Secretary of State use only

g:\corp\forms\partnership\auth.pdf
Revised 08/2002

Web Form

IDAHO SECRETARY OF STATE
06/20/2008 05:00
CK: 1888 CT: 227205 BH: 1120792
1 @ 100.00 = 100.00 PARTN AUT # 2

K630