



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

**FILED EFFECTIVE**

2018 SEP -6 AM 8:54

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.

1. The name of the partnership is: Naked is Responsible
2. The street address of its chief executive office is: Cedar street bridge Public market 334 N. first Ave Sandpoint ID
3. The street address of one (1) office in Idaho: Cedar street bridge public market Kiosk 109 334 N first Ave Sandpoint ID
4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Markell Walson</u>	<u>108 Kootenai meadow Dr Sandpoint</u>
<u>Ashliegh hepinstall</u>	<u>135 Kootenai meadow Dr sandpoint ID</u>

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

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

<u>Markell Walson</u>	_____	_____
<u>Ashliegh hepinstall</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) <u>Markell Walson</u>	_____
Typed Name <u>MARKELL WALSON</u>	_____
2) <u>Ashliegh hepinstall</u>	_____
Typed Name <u>Ashliegh hepinstall</u>	_____
3) _____	_____
Typed Name _____	_____

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/06/2018 05:00

CK:2067 CT:363054 BH:1662731  
1@ 100.00 = 100.00 PARTN AUT #2  
1@ 20.00 = 20.00 CORP SUR #3

9:\corporate\forms\partnership\auth p65

Revised 09/2002

Web Form

K1588

We do not receive mail AT this Address  
All mail goes

83864

83864