6	······································		
	STATEMENT OF P AUTHOR (Instructions on bac	RITY	FILED EFFECTIVE 2017 MAY -2 AM 8: 50 SECRETARY OF STATE
			SECRETARY OF STATE STATE OF IDAHO
	rsigned partnership hereby file ring information to the Secreta		
1. The na	ame of the partnership is:	na Shaved Ice	
2. The st	reet address of its chief execu	tive office is:	0 S Wendell ID, 83355
3. The st	reet address of one (1) office i	n Idaho:2176 E 2950 S V	Vendell, ID
Na	ames and mailing addresses o Ime 1 Connell	of all partners (attached : Address 2176 E 2950 S Wendell II	
Kristin	Simarago-Cabanting	2176 E 2950 S Wendell II	 D, 83355
5. The na held in the Krisita	e name and address of the age ames of the partners authorize e name of the partnership: n Simarago-Cabanting n Connell		
		<u> </u>	
6. Signat <u>1)</u> <u>Typed</u> <u>2)</u> <u>Typed</u> <u>3)</u> Typed	Name Holdin Connell	6 6	Secretary of State use only IDAHO SECRETARY OF STATE 05/02/2017 05:00 :1530 CT:338942 BH:158201 00.00 = 100.00 PARTN AUT KI460