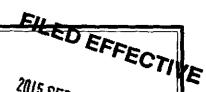


Typed Name

STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)



SECDET AM 9: 09

L1307

Web Ferm

The undersigned partnership hereby files a statement of partnership authority, and submit the following information to the Secretary of State pursuant to Idaho Code § 53-3-303. 1. The name of the partnership is: World Bee Professional Services 2. The street address of its chief executive office is: 1403 E. Wallace Ave Coerd'Alone, ID 83814 3. The street address of one (1) office in Idaho: 4. The names and mailing addresses of all partners (attached sheets may be added): Name Address 1403 E. Wallace Ave. COX, ID 83814 714. E. WAHACE AUC. COA I) 83814 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: 6. Signature of at least 2 partners: Secretary of State use only IDAHO SECRETARY OF STATE CK:CASH CT:314468 BH:1491908

10 100.00 = 100.00 PARTN AUT #3

10 20.00 = 20.00 CORP SUR #4 Typed Name Jarob Johnson