

Typed Name

STATEMENT OF PARTNERSHIP FILED EFFECTIVE AUTHORITY

(Instructions on back of application)2005 HAR 16 AM 8: 52

STATE OF WAHO

the following information to the S	reby files a statement of partnership authority, and submits secretary of State pursuant to Idaho Code § 53-3-303.
The name of the partnership i	O"Grady & Williams Consulting s:
2. The street address of its chief	executive office is:
	office in Idaho:
The names and mailing address Name	esses of all partners (attached sheets may be added): Address
Valerie Williams	PO Box 5689, Ketchum ID 83340
Linda O'Grady	541 Westgate Drive, Napa CA 94558
Valerie Williams	f the registered agent in Idaho is: 309 Sage Road, Ketchum ID 83340 athorized to execute an instrument transferring real property
held in the name of the partners Valerie Williams	
6. Signature of at least 2 partner 1) Value Williams Typed Name Valerie Williams	Secretary of State use only
Typed Name Linda O'Grady	IDANO SECRETARY OF STATE

IDANO Ø3/16 CK: 2021 1 0 100.00

IDANO SECRETARY OF STATE

03/16/2005 05:00

CK: 2021 CT: 103489 BH: 798804
1 0 100.00 = 100.00 PARTN AUT # 2

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