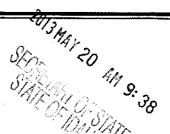


STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)



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: 2. The street address of its chief executive office is: 428 Summer Ct. Nampa, Idaho 83686 3. The street address of one (1) office in Idaho: _____428 Summer Ct. Nampa, Idaho 83686 4. The names and mailing addresses of all partners (attached sheets may be added): Name Address John S. Elliott 428 Summer Ct. Nampa, Idaho 83686 Ian N. Elliott 734 North Pointe Dr. Twin Falls, Idaho 83301 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: John S. Elliott lan N. Elliott 6. Signature of at least 2 partners: Secretary of State use only lan N. Elliott Typed Name

IDAHO SECRETARY OF STATE 95/20/2013 95:60 CK: 1722 CT: 283315 BH: 13744% 1 8 188.88 = 188.88 PARTH AUT # 2

K 1113