



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2005 JUN 17 05:00

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: Playforward Designs

2. The street address of its chief executive office is: _____

819 N. Division Ave, Sandpoint, Idaho, 83864

3. The street address of one (1) office in Idaho: _____

819 N. Division Ave, Sandpoint, Idaho, 83864

4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Ryan Zimmerle</u>	<u>PO BOX 925, Sandpoint, Idaho, 83864</u>
<u>Dustin Dempsey</u>	<u>819 N. Division Ave, Sandpoint, Idaho, 83864</u>

OR the name and address of the registered agent in Idaho is:

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

<u>Ryan Zimmerle</u>	_____	_____
<u>Dustin Dempsey</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) *Ryan Zimmerle*

Typed Name Ryan Zimmerle

2) *Dustin Dempsey*

Typed Name Dustin Dempsey

3) _____

Typed Name _____

Secretary of State use only

9:\corp\forms\guborn\partnershipauth.p65 Revised 01/2001

IDAHO SECRETARY OF STATE
06/17/2005 05:00
CK: 1000 CT: 189758 BM: 816701
1 @ 100.00 = 100.00 PARTN AUT # 2

K283