



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2017 AUG 10 AM 09:21

SECRETARY OF STATE
STATE OF IDAHO

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: Gypsy Soul Boutique

2. The street address of its chief executive office is: 310 S Hwy 93, Challis, ID 83226

3. The street address of one (1) office in Idaho: 310 S Hwy 93, Challis, ID 83226

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

Name
Lanita Kivi

Address
P.O. Box 1043, Challis, ID 83226

Name
Derris Anderson

Address
P.O. Box 933, Challis, ID 83226

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:

1) 

Typed Name Lanita Kivi

2) 

Typed Name Derris Anderson

3) 

Typed Name

corpforms/partnershipauth.p65
Revised 09/2002

Secretary of State use only
IDAMO SECRETARY OF STATE
08/10/2017 05:00
C# 674904734 CT:343317 BH:1597600
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Web Form

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