



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

08 APR 30 AM 8:36
SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

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.

- The name of the partnership is: EXTREME PLASTERING
- The street address of its chief executive office is: 847 Chantilly Ln. Idaho Falls, ID 83402
- The street address of one (1) office in Idaho: _____

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

Name	Address
<u>Jonathan Kirkham</u>	<u>847 Chantilly Ln. Idaho Falls, ID 83402</u>
<u>Tyson Nef</u>	<u>822 Buckboard Ln. Idaho Falls, ID 83402</u>

OR the name and address of the agent in Idaho who maintains a list of all partners:

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

<u>Jonathan Kirkham</u>	_____	_____
<u>Tyson Nef</u>	_____	_____

- Signature of at least 2 partners:

- Jonathan Kirkham
Typed Name Jonathan Kirkham
- Tyson Nef
Typed Name Tyson Nef
- _____
Typed Name _____

Secretary of State use only

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Revised 09/2002

Web Form

IDAHO SECRETARY OF STATE
04/30/2008 05:00
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