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STATEMENT OF PARTNERSHIP **AUTHORITY**

(Instructions on back of application)

-2014 FEB -3 AM 9: 50

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: 114 Sanborn Creek Rd. Priest River, ID 83856 3. The street address of one (1) office in Idaho: 114 Sanborn Creek Rd. Priest River, ID 83856 4. The names and mailing addresses of all partners (attached sheets may be added): Name Address 114 Sanborn Creek Rd. Priest River, ID 83856 Ryan Austin 114 Sanborn Creek Rd. Priest River, ID 83856 Stacy Austin 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: Ryan Austin **Stacy Austin** 6. Signature of at least 2 partners: Secretary of State use only Typed Name Ryan Austin K1156 Stacy Austin **IDAHO SECRETARY OF STATE** 02/03/2014 05:00 CK: 1901 CT: 292491 BH: 1498838