

## STATEMENT OF PARTNERSHIP AUTHORITY

FILED EFFECTIVE

2005 FEB 14 PH 2: 30

STATE OF IDANO

(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.

| ne name of the partnership is: Neil ar  | id Ca   |      | _                | _             | 3 70               | cchin  |
|---|---------|------|------------------|---------------|--------------------|--|
| ne name of the partitional  |         | al'  | vin A            | dam           | s, A Partner       | CSHIP  |
| The street address of its chief executive of  | fice is | :    | 332              | E 1           | 100 S              |  |
| he street address of its chief exception  |         |      |                  |               | ID 83318           |  |
|   |         |      |                  |               |                    |  |
| he street address of one (1) office in Idaho:   |         |      | 332 E 1100 S     |               |                    |  |
|   |         |      | Burley, ID 83318 |               |                    |  |
|   |         |      |                  |               |                    |  |
| The names and mailing addresses of all p  | artne   | rs ( | attache          | ed st         | neets may be add   | ded):  |
| Namo Addi   | ress    |      |                  |               |                    |  |
| Neil J Adams  |         |      |                  |               | Burley, ID         |  |
| Calvin Adams  | 332     | E    | 1100             | s,            | Burley, ID         | 83318  |
| Carvin  |         |      |                  |               |                    |  |
| The names of the partners authorized to I in the name of the partnership:   | execu   | ute  | an inst          | rum           | ent transferring r |  |
| id in the hame of the parties of the  |         |      |                  | -             |                    |  |
| eld in the harie of the parties of the  |         |      |                  | <b>-</b>      |                    |  |
| eld in the harie of the parties of the  |         |      |                  | -<br>-        |                    | ear prope                                    |
| eld in the hame of the parties  |         |      |                  | -<br>-        |                    |  |
|   |         |      |                  | -<br>-        |                    |  |
| S. Signature of at least 2 partners:  |         |      |                  | -             | Secretary of State |  |
| 5. Signature of at least 2 partners:  |         |      |                  | <b>-</b><br>- |                    |  |
| 5. Signature of at least 2 partners:  |         |      |                  | _             |                    |  |
| Signature of at least 2 partners:  1) July 1  Typed Name Neil J Adams 2) (All) (Line)                                 |         |      |                  | -             | Secretary of State | use only                                     |
| Signature of at least 2 partners:  1) July 1  Typed Name Neil J Adams  2) July 1  Typed Name Calvin Adams             |         |      |                  | -             | Secretary of State | use only  CRETARY OF  CRETARY OF  CRETARY OF |
| Signature of at least 2 partners:  1) July Law Typed Name Neil J Adams 2) All Law |         |      |                  | -             | Secretary of State | use only  CRETARY OF 2005                    |

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