

STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

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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. Salisbury Farms 1. The name of the partnership is: 2. The street address of its chief executive office is: _____ Moscow, Idaho 83843 1028 Pine Crest Road, Moscow, Idaho 83843 3. The street address of one (1) office in Idaho: 4. The names and mailing addresses of all partners (attached sheets may be added): Address Name 1028 Pine Crest Road, Moscow, Idaho 83843 Jonathan Salisbury 400 Mill Road, Moscow, Idaho 83843 **Edwin Salisbury** 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: Jonathan Salisbury **Edwin Salisbury** 6. Signature of lat least 2 partners: Secretary of State use only Jonathan Salisbury Edwin Salisbury Typed Name IDAHO SECRETARY OF STATE 11/01/2010 05:00 CK: 2990 CT: 252431 BH: 124532 Typed Name