



STATEMENT OF PARTNERSHIP AUTHORITY

SEP 17 AM 9:04

SECRETARY OF STATE STATE OF IDAHO

(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.

1. The name of the partnership is: Lone Pine Dairy

2. The street address of its chief executive office is: 5592 W. Kuna Road, Kuna, ID 83634

3. The street address of one (1) office in Idaho: 5592 W. Kuna Road, Kuna, ID 83634

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

Name	Address
Stephen Boschma	5592 W. Kuna Road, Kuna, ID 83634
Thomas Boschma	4043 W. Harbor Point Drive, Meridian, ID 83642

OR the name and address of the registered agent in Idaho is:

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

Stephen Boschma		
Thomas Boschma		

6. Signature of at least 2 partners:

1) [Signature of Stephen Boschma]

Typed Name Stephen Boschma

2) [Signature of Thomas Boschma]

Typed Name Thomas Boschma

3) _____

Typed Name _____

Secretary of State use only

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Web Form

IDAHO SECRETARY OF STATE 09/17/2007 05:00 CK: 13300 CT: 217572 BH: 1075040 1 @ 100.00 = 100.00 PARTN AUT # 2 1 @ 20.00 = 20.00 EXPEDITE C # 3