

FILED EFFECTIVE



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

08 JUL 18 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

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: S & S Partnership
2. The street address of its chief executive office is: 1639 East 1600 North,
Terreton, Idaho 83450
3. The street address of one (1) office in Idaho: 1639 East 1600 North,
Terreton, Idaho 83450
4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Larry D. Simmons</u>	<u>P.O. Box 36, Bancroft, ID 83217</u>
<u>Todd W. Simmons</u>	<u>1639 East 1600 North, Terreton, ID 83450</u>
<u> </u>	<u> </u>

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:

<u>Larry D. Simmons</u>	and	<u>Todd W. Simmons</u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

6. Signature of at least 2 partners:

1) *[Signature]*
Typed Name Larry D. Simmons

2) *[Signature]*
Typed Name Todd W. Simmons

3)
Typed Name

Secretary of State use only

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IDAHO SECRETARY OF STATE
07/18/2008 05:00
CK: 4485 CT: 22233 BH: 1127720
1 @ 100.00 = 100.00 PARTN AUT # 2

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Revised 08/2002

Web Form