

FILED EFFECTIVE

STATEMENT OF AUTHORITY

2018 JUN 15 AM 8:44

SECRETARY OF STATE
STATE OF IDAHO

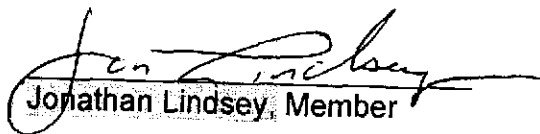
1. The name of the company: Farewell Lake, LLC
2. Street address of designated office: 2163 Alpine Creek Dr., Fruitland, ID 83619
3. Mailing address of designated office: 2163 Alpine Creek Dr., Fruitland, ID 83619

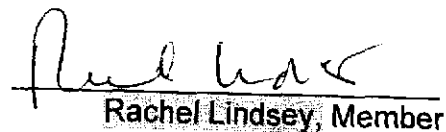
Full Quiver, LLC, Managing Member of Farewell Lake, LLC, hereby has the authority to:

In their discretion distribute the profits and/or capital of the LLC business pro-rata or non-pro-rata as they deem advisable. If the members make non-pro-rata distributions, those shall be taken into account in re-calculating each member's capital account (and/or drawing account) at the end of the LLC's fiscal year.

DATED: May 24 2018

SIGNATURE: Farewell Lake, LLC,
By: Full Quiver, LLC, General Partner
By:


Jonathan Lindsey, Member


Rachel Lindsey, Member

IDAHO SECRETARY OF STATE

06/15/2018 05:00

CK:623 CT:225940 BH:1649061

1@ 30.00 = 30.00 LLC AUTH #2

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