

Typed Name

Typed Name

STATEMENT OF PARTNERSHIP AUTHORITY

FILED EFFECTIVE

(Instructions on back of application 2016 AUG 22 AM 9: 30

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: Tacos e Paisa
2. The street address of its chief executive office is:
3. The street address of one (1) office in Idaho: 129 east main Street Jerothe, ID, 85558.
4. The names and mailing addresses of all partners (attached sheets may be added): Name Address Sontiago Garcia Pineda 214, 4th are east Jerone, ID 83338 Rosa.o. Gallardo Ramirez 214, 4th are east Jerone, ID 83338
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: Son Hago Gwol a Pineda Rosa o Gallardo Ratnizez
6. Signature of at least 2 partners:
1) Rose Olivia Collordo Range Secretary of State use only Typed Name Rose Olivia Gallordo Range 08/22/2016 05:00 CK: 606 CT: 328168 BH: 1543033

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Taraa

816 100.00 = 100.00 PARTN AUT #2
16 20.00 = 20.00 CORP SUR #3

Web Form