



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

2015 JUN 23 AM 8:33

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: WIGGLES & GIGGLES LEARNING CENTER
2. The street address of its chief executive office is: 507 W MAIN REXBURG ID 83440
3. The street address of one (1) office in Idaho: 507 W MAIN REXBURG ID 83440

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

Name	Address
<u>LORI COLEMAN</u>	<u>507 W MAIN REXBURG ID 83440</u>
<u>GREG COLEMAN</u>	<u>507 W MAIN REXBURG ID 83440</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>LORI COLEMAN</u>	<u></u>	<u></u>
<u>GREG COLEMAN</u>	<u></u>	<u></u>

6. Signature of at least 2 partners:

- 1) Lori Coleman
Typed Name LORI COLEMAN
- 2) Greg Coleman
Typed Name GREG COLEMAN
- 3)
Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE

06/23/2015 05:00

CK:244 CT:311672 BH:1481039
10 100.00 = 100.00 PARTN AUT #2

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