Typed Name

## FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

## AMENDMENT TO STATEMENT OF PARTNERSHIP AUTHORITY

subm	The undersigned hereby files a its the following information to	an Amendment to Statement of Partnership Authority, and the Secretary of State pursuant to Idaho Code § 53-3-303.
1.	The name of the Partnership is	s: AO Ranch
2.	The date the Statement of Par-	tnership Authority was filed was: 7/20/07
3.	File No.: K514	
4.	The information on the memb	pers shall be amended as follows:
	William J. Wallace 221 N	Cottonwood Lane, Blackfoot, ID 83221 Add
	Barbara Ockerman	Delete
5. The name of the partners authorized to execute an instrument transfer held in the name of the partnership:		
	Susan Wallace William J. Wallace Jennifer Smith	
6. Si	ignature/of at least 2 partners:	<b>)</b>
(1)	yped Name Susan Wallace	Secretary of State use only
2	William J. Wall	use KSI4
<u>I)</u> 3)	yped Name William J. Wallace	IDAHO SECRETARY OF STATE 12/04/2009 05:00