



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE  
08 MAR 14 AM 9:01  
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: West Mountain Embroidery
2. The street address of its chief executive office is: 2621 Summercrest St.  
Caldwell, Idaho 83607
3. The street address of one (1) office in Idaho: \_\_\_\_\_
4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Heather M Graham</u>	<u>2621 Summercrest St. Caldwell, Idaho 83607</u>
<u>Brodie P Graham</u>	<u>2621 Summercrest St. Caldwell, Idaho 83607</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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Signature of at least 2 partners:

1) Heather M Graham  
Typed Name Heather M Graham

2) Brodie P Graham  
Typed Name Brodie P Graham

3) \_\_\_\_\_  
Typed Name \_\_\_\_\_

Secretary of State use only

g:\compliance\forms\partnershipauth.pdf  
Revised 09/2002

Web Form

IDAHO SECRETARY OF STATE  
03/14/2008 05:00  
CK: 8325 CT: 218181 BH: 1104578  
1 @ 100.00 = 100.00 PARTN AUT # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

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