



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

08 JUN -2 AM 9:21

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: ROTH FARMS

2. The street address of its chief executive office is: 539 S 800 E, Jerome, Idaho 83338

3. The street address of one (1) office in Idaho: 539 S 800 E, Jerome, Idaho 83338

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

| Name | Address |
|-------|---------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

OR the name and address of the agent in Idaho who maintains a list of all partners:

Donna Roth Habersetzer, LLC 539 S 800 E, Jerome ID 83338

5. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

| | | |
|------------------------------------|-------|-------|
| <u>J. Michael Roth, LLC</u> | _____ | _____ |
| <u>Donna Roth Habersetzer, LLC</u> | _____ | _____ |
| _____ | _____ | _____ |

6. Signature of at least 2 partners:

1) J. Michael Roth
Typed Name J. Michael Roth

2) Donna Roth Habersetzer
Typed Name Donna Roth Habersetzer

3) _____
Typed Name _____

Secretary of State use only

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Revised 09/2002

Web Form

IDAHO SECRETARY OF STATE
06/02/2008 05:00
CK: 9327 CT: 138316 BH: 1117667
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