

STATEMENT OF PARTNERSHIPFILED EFFECTIVE AUTHORITY

(Instructions on back of application) 08 FEB -4 PM 12: 38

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.

ne name of the partnership i	S:	KA CONSTRU	·
he street address of its chief		63 N 3400 E, 0	GRANT ID 83442
he street address of one (1)	office in Idaho: SA	ME	
he names and mailing addre	esses of all partners	attached sh	eets may be added):
Name KRYSTYON YOUNG	Address 63 N 3400 E	, GRANT ID 8	3442
ANDREW DECKER	318 PIONE	R ROAD #1200), REXBURG ID 83440
OR the name and address of	the agent in Idaho w	ho maintains	a list of all partners:
The names of the partners at in the name of the partners	uthorized to execute	e an instrume	nt transferring real proper
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The names of the partners at in the name of the partners KRYSTYON YOUNG	uthorized to execute	e an instrume	nt transferring real proper
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The names of the partners at in the name of the partners KRYSTYON YOUNG ANDREW DECKER Signature of at least 2 partners	uthorized to execute thip:	e an instrume	nt transferring real proper
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