Typed Name



STATEMENT OF PARTNERSHIP **AUTHORITY**

(Instructions on back of application)

FILED EFFECTIV

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SEURETARY OF STAT 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: A Ridgeline 2. The street address of its chief executive office is: _____ St. Anthony, ID 83445 3. The street address of one (1) office in Idaho: ______1908 East 500 North St. Anthony, ID 83445 4. The names and mailing addresses of all partners (attached sheets may be added): Name Address See attached sheet 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: David V Crapo Blair E Crapo George M Crapo Bruce K Crapo Richard L Crapo 6. Signature of at least 2 partners: Secretary of State use only Richard L Crapo Typed Name Typed Name David V Crapo **IDAHO SECRETARY OF STATE**

RIDGELINE							
Partner	20%	George Crapo	726 N. 2100 E.	8/31/1939	St. Anthony, ID 83445	519-40-4884	624-7873
Partner	20%	Richard Crapo	435 N. 1500 E.		St. Anthony, ID 83445	519-42-9314	624-7492
Partner	20%	Blair Crapo	1918 E. 500 N.		St. Anthony, ID 83445	519-44-1408	624-7979
Partner	20%	Bruce Crapo	680 N. 2100 E.		St. Anthony, ID 83445	519-52-0542	824-3507
Parmer	20%	David Crapo	1926 E. 700 N.		St. Anthony, ID 83445	518-58-8592	624-7471