

## STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

## FILED EFFECTIVE

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 3337 OF STATE OF IDAHO	
1. The name of the partnership is: H&	L Jones Farm Partnership
2. The street address of its chief execu	Itive office is: 1200 Jones Road, Genesee, ID 83832
3. The street address of one (1) office	in Idaho:
_	of all partners (attached sheets may be added):
Name Howard Jones	Address 1200 Jones Road, Genesee, ID 83832
Loris Jones	2236 Concord, Moscow, ID 83843
<del></del>	ent in Idaho who maintains a list of all partners:
Loris Jones	
6. Signature of at least 2 partners:  1) Howard Jones Typed Name Howard Jones	Secretary of State use only  Secretary of State use only  IDAHO SECRETARY OF STATE
2 Lord C. Jones	01/09/2017 05:00
Typed Name Loris Jones	
Typed Name	IDAHO SECRETARY OF STATE  01/09/2017 05:00  CK:961 CT:333104 BH:1562885  CK:961 CT:333104 BH:1562885  LUDO DESPRE