



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2017 FEB -9 AM 9:16

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: Homedale Farmers Market

2. The street address of its chief executive office is: 5303 Ormsby Avenue Caldwell, ID 83607

3. The street address of one (1) office in Idaho: same

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:

Denise Dixon

5303 Ormsby Avenue Caldwell, ID 83607

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

Denise Dixon

6. Signature of at least 2 partners:

1) Denise Dixon

Typed Name Denise Dixon

2) J

Typed Name Jennifer Adkins

3)

Typed Name

g:\corpforms\gforms\partnerauth.p65
Revised 09/2002

Web Form

Secretary of State use only

IDaho SECRETARY OF STATE
02/09/2017 05:00

CK:1068 CT:334397 BH:1568130
1@ 100.00 = 100.00 PARTN AUT #2
1@ 20.00 = 20.00 EXPEDITE C #3

K1440