

## STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

## FILED EFFECTIVE

2013 SEP -6 AM 11: 34

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.

The name of the partnershi	p is:	General Par	tnership ·	
2. The street address of its ch	ief executive office i	s:226 E 21s	t St Burley ID 83318	
3. The street address of one (	1) office in Idaho: _		•	
4. The names and mailing add	dresses of all partne	rs (attached	sheets may be added):	
Name	Address	Address		
Alex Aguilar	226 E 21s	226 E 21st St Burley ID 83318		
Corine Aguilar	226 E 21s	226 E 21st St Burley ID 83318		
OR the name and address	of the agent in Idaho	who mainta	ins a list of all partners:	
	<del></del>			
5. The names of the partners neld in the name of the partne Alex Aguilar		te an instru	ment transferring real property	
Corine Aguilar				
	_	<del></del>		
6 Cignoture of at least 2 part	nore:			
6. Signature of at least 2 parts	11615.			
1) Cylylur		123	Secretary of State use only	
Typed Name Alex Aguilar		auth.p6		
2) Coine Agus	las	omskiprformskpartnershipauth. p65 Revised 09/2002		
Typed Name Corine Aguilar		s/partn 3/2002	<b>-</b>	
3)		ns\gpforms\partr	IDAHO SECRETARY OF STATE 09/06/2013 05:00	
Typod Namo		Rey Rey	CK: 1819 CT: 287225 BH: 1389826	

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