



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

10 DEC -2 AM 10: 05

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: Fantastic Journeys Publishing

2. The street address of its chief executive office is: 8023 Snohomish St Boise, ID 83709

3. The street address of one (1) office in Idaho: 8023 Snohomish St Boise, ID 83709

4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Tonya Adolfson</u>	<u>8023 Snohomish St Boise, ID 83709</u>
<u>John Farmer</u>	<u>8023 Snohomish St Boise, ID 83709</u>
_____	_____

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:

<u>Tonya Adolfson</u>	_____	_____
<u>John Farmer</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1)

Typed Name Tonya Adolfson

2)

Typed Name John Farmer

3) _____

Typed Name _____

Secretary of State use only

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Revised 09/2002

Web Form

IDAHO SECRETARY OF STATE
12/02/2010 05:00
CK: 550092 CT: 172099 BH: 1249193
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