

AMENDMENT TO STATEMENT OF PARTNERSHIP AUTHORITY

FILED EFFECTIVE

2018 SEP 13 PM 1: 32

(instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

The name of	the partnership authority is	s :	,	,
	Jo	ohnson Square Renta	als	
	which its statement of partn State was03/14/2	2000	s filed with the Idaho its domestic state is:	Idaho .
. The stateme	nt of partnership authority	is amended as fol	OWS: [check appropriate box	(es)]
a. The name	e of the partnership authori uare Rentals	ity is amended to re	ead:	
b. The name	e of each withdrawing part	ner is:		
	nnson / deceased			
Dean Johnson	on / trustee			
d. The name	e(s) of partners added or reerty held in the name of the	moved for authoriza		nent transferring
Remove			Dean Johnson	
Add: Gary I	endments (optional): Dec Johnson ast two (2) partners:			
Signature of at 16	Sur T- John	son =		
	cott T. Johnson	pud'ed	Secretary of State : IDANO SECRET	use only ARY OF STATE
Signature 7	Willi David	Some and a	09/13/20	
	many 1/ WM	Mark Low Se	CK:CASH CT:363	
AT IMIT I AMILIA	illip David Johnson	- 5 €		4 35 BH:16640
signature	illip David Johnson	g/cop/forms/p/form	10 30.00 = 30.0	

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