

STATEMENT OF PARTNERSHIP LED EFFECTIVE **AUTHORITY**

(Instructions on back of application)

	ne following information to the Secretary of Sta	iie pursuan	artnership authority, and submits to Idaho Code s 53-3-303
1.	The name of the partnership is:		
2.	The street address of its chief executive office is: 2368 E 1775 S, Gooding, ID 83330		
3.	The street address of one (1) office in Idaho:	2368 E 177	5 S, Gooding, ID 83330
4.	The names and mailing addresses of all partners (attached sheets may be added): Name Address John Arkoosh 2368 E 1775 S, Gooding, ID 83330		
	Dill A-L . I	J.S. Hwy 26, Gooding, ID 83330	
5. hel	OR the name and address of the registered a The names of the partners authorized to exect Id in the name of the partnership: John Arkoosh		
	Bill Arkoosh		

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