



**STATEMENT OF PARTNERSHIP
AUTHORITY**

(Instructions on back of application)

FILED EFFECTIVE
-6 AM 9-20

SECRETARY OF STATE
STATE OF CALIFORNIA
Partnership authority, and
California Code of Civil Procedure

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.

- ALBION INVESTMENT COMPANY
1. The name of the partnership is: _____
2. The street address of its chief executive office is: _____ 1329 ALBION AVENUE BURLEY, ID 83318
- _____
3. The street address of one (1) office in Idaho: _____ SAME AS #2 ABOVE

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

Name	Address
STEPHEN D. WESTFALL	1329 ALBION AVENUE BURLEY, ID 83318
DAVID J. WESTFALL	1329 ALBION AVENUE BURLEY, ID 83318


OR the name and address of the registered agent in Idaho is:


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

STEPHEN D. WESTFALL

DAVID J. WESTFALL

6. Signature of at least 2 partners:

1) 
Typed Name STEPHEN D. WESTFALL

2) 
Typed Name DAVID J. WESTFALL

3) _____
Typed Name _____

Secretary of State use only

...corporate/crm/partnershipauth.p65

Revised 01/2001

Web Farm

IDAHO SECRETARY OF STATE
 12/06/2002 05:00
 CK: 210 CT: 165540 BH: 649901
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