



AMENDMENT TO STATEMENT OF PARTNERSHIP AUTHORITY

2014 MAR -6 AM 9:27

(instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the partnership authority is:

CALLISTER RANCH

2. The date of which its statement of partnership authority was filed with the Idaho

Secretary of State was 5/31/2011 and its domestic state is: IDAHO

3. The statement of partnership authority is amended as follows: [check appropriate box(es)]

- ☐ a. The name of the partnership authority is amended to read:

- ☒ b. The name of each withdrawing partner is:

LOVELL J. CALLISTER

- ☒ c. The name and business address of each new partner is: (if more space is needed, continue in block e)

LOIS S. CALLISTER 453 N. 325 W.
BLACKFOOT, ID. 83221

- ☒ d. The name(s) of partners added or removed for authorization to execute an instrument transferring real property held in the name of the partnership:

Add: LOIS S. CALLISTER

Remove: LOVELL J. CALLISTER

- ☐ e. Other amendments (optional):

Signature of at least two (2) partners:

Signature Rex L. Callister

Typed Name REX L. CALLISTER

Signature Lois S. Callister

Typed Name LOIS S. CALLISTER

Signature _____

Typed Name _____

Secretary of State use only

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Revised 11/2010

IDAHO SECRETARY OF STATE
03/06/2014 05:00
CK: 2992 CT: 293911 BH: 1413897
1 @ 38.00 = 38.00 STMT AMEN # 2

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