

## STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

## FILED EFFECTIVE

2018 JUL 31 11:30

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.

| The name of the partnership i                                       | Greenleaf Farmers Market  |            |
|---|---|------------|
| . The street address of its chief                                   | 04400 Table D. D. C. (11)   | į          |
| . The street address of one (1)                                     | office in Idaho:  | -          |
| . The names and mailing addre                                       | sses of all partners (attached sheets may be added):  | -          |
| Name<br>Stephen Stoops Jr   | Address 21168 Tucker Rd Greenleaf, ID 83626   | ,<br>,     |
| Julie Stoops  | 21168 Tucker Rd Greenleaf, ID 83626   |            |
| i. The names of the partners au<br>eld in the name of the partnersh | norized to execute an instrument transferring real property p:                              | y          |
|   |   | —  <br>—   |
| 6. Signature of at least 2 partner                                  | :   | ~-  <br>   |
| 1) Typed Name Stephen Stoops Jr                                     | Secretary of State use only   |            |
| Typed Name Stephen Stoops Jr  2)  Typed Name Julie Stoops  3)       | 1DAHO SECRETARY OF ST<br>07/31/2018 05:<br>CK:CASH CT:359072 BH:<br>10 100.00 = 100.00 PART | 00<br>1656 |
| Typed Name  | Revige  |            |