



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2017 AUG 28 PM 2:19

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.

1. The name of the partnership is: River-Bend Investments, General Partnership

2. The street address of its chief executive office is: _____
20 Chevy Street, Sandpoint, ID 83864

3. The street address of one (1) office in Idaho: _____
20 Chevy Street, Sandpoint, ID 83864

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

Name	Address
<u>Troy G. Krumenacker</u>	<u>22592 Hwy 2, Sandpoint, Id 83864</u>
<u>Kathleen Pizzolato</u>	<u>22592 Hwy 2, Sandpoint, Id 83864</u>
_____	_____

OR the name and address of the agent in Idaho who maintains a list of all partners:

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

<u>Troy G. Krumenacker</u>	_____	_____
<u>Kathleen Pizzolato</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1)
Typed Name Troy G. Krumenacker

2)
Typed Name Kathleen Pizzolato

3) _____
Typed Name _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/28/2017 05:00

CK:1042 CT:247799 BH:1600256
1@ 100.00 = 100.00 PARTN AUT #2
1@ 20.00 = 20.00 EXPEDITE C #3

g:\comforms\forms\partnership\auth.p65
Revised 09/2002
Web Form

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