



STATEMENT OF PARTNERSHIP AUTHORITY

FILED EFFECTIVE

(Instructions on back of application)

2013 MAY -9 AM 9:04

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 is: Kyle & Rob Productions
- The street address of its chief executive office is: 6738 Denver St, Bonners Ferry, Idaho
83805
- The street address of one (1) office in Idaho: 6738 Denver St, Bonners Ferry, Idaho
83805

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

Name	Address
<u>Kyle Flory</u>	<u>PO Box 1924, Bonners Ferry, Idaho 83805</u>
<u>Rob Tenas</u>	<u>PO Box 1924, Bonners Ferry, Idaho 83805</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>Kyle Flory</u>	_____	_____
<u>Rob Tenas</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) [Signature]
Typed Name Kyle Flory

2) [Signature]
Typed Name Rob Tenas

3) _____
Typed Name _____

Secretary of State use only

g:\corpforms\partnershipauth.p65
Revised 08/2002

Web Form

IDAHO SECRETARY OF STATE
05/09/2013 05:00
CX: 565920211 CT: 282949 BH: 1373106
1 @ 100.00 = 100.00 PARTN AUT # 2

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