

STATEMENT OF PARTNERSHIP AUTHORITY 09

09 MAR 20 PM 4: 36

(Instructions on back of application) 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 street address of its	chief executive office is: 1699 W Sugar Crest St, Eagle	ID 83616
	one of the office is.	
The street address of one	e (1) office in Idaho: 1699 W Sugar Crest St, Eagle ID 8	 3616
1.		
The names and mailing a	ddresses of all partners (attached sheets may be a	
Name Bret & Jana Ferguson	Address Address 1699 W Sugar Crest St, Eagle ID 83616	aa ea):
Tom & Jennifer Ferguson	6290 Johnson Dr., Paradise, CA 95969	
OR the name and address	s of the agent in Idaho who maintains a list of all part	ners:
he names of the partners	s authorized to execute an instrument transferring ership:	
The names of the partners	s authorized to execute an instrument transferring	
The names of the partners I in the name of the partn Bret Ferguson	s authorized to execute an instrument transferring ership: Tom Ferguson	
The names of the partners in the name of the partners Bret Ferguson Jana Ferguson Signature of at least 2 partners and the partners are the	s authorized to execute an instrument transferring pership: Tom Ferguson Jennifer Ferguson rtners:	
The names of the partners in the name of the partners Bret Ferguson Jana Ferguson Signature of at least 2 partners and the partners are the	s authorized to execute an instrument transferring tership: Tom Ferguson Jennifer Ferguson rtners:	real property
The names of the partners in the name of the partners in the name of the partners are Ferguson Jana Ferguson Signature of at least 2 partners are formally are greaters. Signature of at least 2 partners are formally are form	s authorized to execute an instrument transferring tership: Tom Ferguson Jennifer Ferguson rtners:	real property

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