



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

12 FEB 21 AM 9:13

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: Double E Farms

2. The street address of its chief executive office is: 296 N 150 E, Blackfoot, ID 83221

3. The street address of one (1) office in Idaho: 296 N 150 E, Blackfoot, ID 83221

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

Name	Address
_____	_____
_____	_____
_____	_____

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

<u>Keith Evans</u>	<u>296 N 150 E, Blackfoot, ID 83221</u>
--------------------	---

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

<u>Keith Evans Farms, LLC</u>	_____	_____
<u>David Evans Farms, LLC</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) Keith Evans
Typed Name Keith Evans Farms, LLC by Keith Evans

2) David Evans
Typed Name David Evans Farms, LLC by David Evans

3) _____
Typed Name _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/21/2012 05:00
CK: 140 C7: 229799 BH: 1311441
1 @ 100.00 = 100.00 PARTN AUT # 3

g:\corp\forms\partnership\auth.pdf
Revised 06/2002
Web Form

K1001