

FILED EFFECTIVE



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

08 SEP 15 AM 9:18

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 is: Bootcamp Fit Club Boot Camp
- The street address of its chief executive office is: 855 E. Lafayette St.  
Boise ID, 83706
- The street address of one (1) office in Idaho: 855 E. Lafayette St  
Boise ID 83706
- The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Johnny Escamilla</u>	<u>855 E. Lafayette</u> <u>Boise ID</u>
<u>Matt Carter</u>	<u>940 E. Ironside Dr</u> <u>Boise ID</u>
	<u>541-579-0251</u>

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

\_\_\_\_\_

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

<u>Johnny Escamilla</u>	_____	_____
<u>Matt Carter</u>	_____	_____
_____	_____	_____

- Signature of at least 2 partners:

1) <u>Johnny Escamilla</u>	_____
Typed Name <u>Johnny Escamilla</u>	_____
2) <u>Matt Carter</u>	_____
Typed Name <u>Matt Carter</u>	_____
3) _____	_____
Typed Name _____	_____

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Revised 09/2002

Secretary of State use only

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IDAHO SECRETARY OF STATE  
09/15/2008 05:00  
CX: 203 CT: 229719 BH: 1135432  
1 @ 100.00 = 100.00 PARTN AUTH # 2  
1 @ 20.00 = 20.00 CORP SUR # 3