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STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2008 OCT 22 PM 3:45

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: Dragonfly Salon & Spa
- The street address of its chief executive office is: 1400 Pomerelle, Burley Id 83318
- The street address of one (1) office in Idaho: 1400 Pomerelle, Burley Id 83318
- The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>David H. Phillips</u>	<u>715 W 100 N. Paul Id 83347</u>
<u>Lorna L. Phillips</u>	<u>715 W 100 N Paul Id 83347</u>
<u>Stegen D. Phillips</u>	<u>1810 R St. Heyburn Id 83338</u>
<u>Jesika Phillips</u>	<u>1810 R Street Heyburn ID 83336</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:

David H. PhillipsLorna L. PhillipsStegen D. PhillipsJesika Phillips

6. Signature of at least 2 partners:

Lorna L. PhillipsTyped Name Lorna L. Phillips2) Stegen D. PhillipsTyped Name Stegen D. Phillips

3) _____

Typed Name _____

Secretary of State Use Only

IDAHO SECRETARY OF STATE

10/22/2008 05:00
 CK: 163988 CT: 172899 BH: 1141303
 1 @ 100.00 = 100.00 PARTN AUT # 2

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FILED EFFECTIVE