

246

FILED EFFECTIVE



# STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2017 NOV -6 AM 8:16

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: Rabid Sales
- The street address of its chief executive office is: 11865 N. Warren St.  
Hayden ID 83835
- The street address of one (1) office in Idaho: 11865 N. Warren St.  
Hayden ID 83835
- The names and mailing addresses of all partners (attached sheets may be added):

| Name                  | Address  |
|-----------------------|--|
| <u>Roger Humphrey</u> | <u>9323 N. Government Way #229 Hayden ID 83835</u> |
| <u>Robert Harsh</u>   | <u>1833 E. Pinehaven Ln. Athol, ID 83838</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>Roger Humphrey</u> | _____ | _____ |
| _____                 | _____ | _____ |
| _____                 | _____ | _____ |

- Signature of at least 2 partners:

- 1) [Signature]

Typed Name Roger Humphrey
- 2) [Signature]

Typed Name Robert Harsh
- 3) \_\_\_\_\_

Typed Name \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

11/06/2017 05:00

CK:16158730 CT:172099 BH:1610585

1@ 100.00 = 100.00 PARTN AUT #2

1@ 20.00 = 20.00 CORP SUR #3

Web Form

K1512