

STATEMENT OF PARTNERSHIP **AUTHORITY**

FILED EFFECTIVE

(Instructions on back of application)

2008 AUG 10 AM 9:51

the following information to the Se	
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	JURIS DOCTOR
2. The street address of its chief e	executive office is:117 SOUTH ADAMS, JEROME, ID 83338
3. The street address of one (1) office in Idaho: 117 SOUTH ADAMS, JEROME, ID 83338	
The names and mailing addres Name	ses of all partners (attached sheets may be added):
ROBERT E. WILLIAMS	Address PO BOX 168, JEROME, ID. 83338
JAMĘS C MESERVY	PO BOX 168, JEROME, ID: 83338
JOHN B. LOTHSPEICH	PO BOX 168, JEROME, ID 83338
OR the name and address of the	he registered agent in Idaho is:
5. The names of the partners auth	he registered agent in Idaho is: norized to execute an instrument transferring real property o:
5. The names of the partners auth	norized to execute an instrument transferring real property
5. The names of the partners auth held in the name of the partnership ROBERT E. WILLIAMS	norized to execute an instrument transferring real property

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