# State of Idaho

Office of the Secretary of State

### CERTIFICATE OF AUTHORITY

OF

### HAILEY ENTERPRISES, A CALIFORNIA LIMITED PARTNERSHIP

### File Number L 7061

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Limited Partnership Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the Application.

Dated: December 8, 2014



Ben yeura SECRETARY OF STATE

By Stery Downer



# **APPLICATION FOR CERTIFICATE** OF AUTHORITY FOR FOREIGN LIMITED PARTNERSHIP (instructions on back of application)

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The signer must be a general partner of the limited partnership.

(instructions on back or application)

The undersigned limited partnership applies for a Certificate of Authority and states as follows: Constant C

. The n	name of the limited partnership is:	:			14.10
	Hailey En	terprises, a C	alifornia Limited Partn	ership	
. Then	The name which it shall use in Idaho is: Hailey Enterprises, a Limited Partne				rship
. It is fo	rmed under the laws of:	Californa	and its date of forma	ation is3/	3/1989
	The address of the office located in its jurisdiction of domicile:				
Stree	Street: 731 Red Ash Drive, Hailey, ID 83333				
Mailin	Mailing: PO Box 2671, Hailey, ID 83333				
5. The a	The address of its principal office (if different than item 4):				
Stree	Street: 1010 Racquet Club Drive, Suite 103, Auburn, CA 95603				
	Mailing:				
3. The a	The address to which correspondence should be addressed (if different than item 5):				
Mailin	og:				
7. Then	The name and physical street address of the registered agent in Idaho is:				
	Gertrude (Trudy) Lacoste, 731 Red Ash Drive, ID 83333				
3. This I	This limited partnership [ ☐is ] [ ☐is not ] a limited liability limited partnership.				
3. The n	he names and respective business and mailing addresses of its general partners:				
Name	9	Street Add	ress	Mailing Addres	ss
	See Attached List		<del></del>	·	
					<u> </u>
			Customer A	cct # :	
Dated:	11/19/2014		(if using p	re-paid account)	
Signature	: Ulan		ithority		RETARY OF STAT
Typed Na	John P Cas	sper	formsteer of authority Revised 11/2010		<b>'2014 05:</b> 01 278242 BH:14
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A "	- General Partner John P Casne	er ⊨amily Partr	nershim la "		

# APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED PARTNERSHIP

### <u>Hailey Enterprises, a California Limited Partnership</u> <u>General Partner Names and Addresses:</u>

John P. Casper Family Limited Partnership 1010 Racquet Club Drive, Suite 103 Auburn CA, 95608

Dorian Hermann 3249 Wasatch Road Placerville, CA 95667

### State of California

## Secretary of State

### **CERTIFICATE OF STATUS**

ENTITY NAME: HAILEY ENTERPRISES, A CALIFORNIA LIMITED PARTNERSHIP

FILE NUMBER: 198906500012 FORMATION DATE: 03/03/1989

TYPE: DOMESTIC LIMITED PARTNERSHIP

JURISDICTION: CALIFORNIA

STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 21, 2014.

**DEBRA BOWEN**Secretary of State