

Typed Name

STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

2017 MAY 30 AMERICA

SECRETARY OF STATE

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. Goose Creek Decor 1. The name of the partnership is: 2. The street address of its chief executive office is: 5358 E. Skidmore Dr., Idaho Falls, ID 83406 3. The street address of one (1) office in Idaho: 4323 Commerce Circle, Idaho Falls, ID 83401 4. The names and mailing addresses of all partners (attached sheets may be added); Name Address Denise Rice 5358 E. Skidmore Dr., Idaho Falls, ID 83406 Ashley Miceli 5358 E. Skidmore Dr., Idaho Falls, ID 83406 Megan Akers 5358 E. Skidmore Dr., Idaho Falls, ID 83406 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: Denise Rice Ashley Miceli Megan Akers 6. Signature of at least 2 partners: Secretary of State use only IDAHO SECRETARY OF STATE 05/30/2017 05:00 Typed Name CK:NO CK# CT:340281 BH:1586182 16 100.00 = 100.00 PARTH AUT #2 10 20.00 = 20.00 EXPEDITE C #3

Web Form