

## STATEMENT OF PARTNERSHIP **AUTHORITY**

(Instructions on back of application)

09 OCT 23 AM 8-27

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 Idaha On the Secretary of State pursuant to

. The name of the partnershi	ip is:
. The street address of its ch	nief executive office is: 11011 Hwy 78, Melba, ID 83641
	· · · · · · · · · · · · · · · · · · ·
3. The street address of one	(1) office in Idaho: 11011 Hwy 78, Melba, ID 83841
. The names and mailing ad	dresses of all partners (attached sheets may be added):
Name James L Jensen	Address 11011 Hwy 78, Melba, ID 83641
Mark S Jensen	10015 Wildhorse Rd, Melba, Idaho
i. The names of the partners	authorized to execute an instrument transferring real property
neld in the name of the partne James L Jensen	ership:
•	ership:
James L Jensen	ership:
James L Jensen  Mark S Jensen	
James L Jensen  Mark S Jensen	iners:
James L Jensen  Mark S Jensen  6. Signature of at least 2 part  1)	Secretary of State use only
James L Jensen  Mark S Jensen  6. Signature of at least 2 part  1) Same S  Typed Name James L Jensen  2) Mah S	Secretary of State use only
James L Jensen  Mark S Jensen  6. Signature of at least 2 part  Typed Name James L Jensen  2) Mark S Jensen  Typed Name Mark S Jensen	Secretary of State use only
Mark S Jensen  6. Signature of at least 2 part  1)	Secretary of State use only