



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

FILED EFFECTIVE

2006 JAN 13 AM 9:02

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.

1. The name of the partnership is: Poelstra Dairy.
2. The street address of its chief executive office is: 1790 E. Shingle Mill Rd
Sandpoint, Id 83864.
3. The street address of one (1) office in Idaho: 1790 E. Shingle Mill Rd.
Sandpoint, Id 83864.

4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Randy N. Poelstra</u>	<u>1790 E. Shingle Mill Rd Sandpoint, Id 83864</u>
<u>Carla A. Poelstra</u>	<u>1790 E. Shingle Mill Rd Sandpoint, Id 83864</u>
<u>Garrett A. Poelstra</u>	<u>2174 E. Shingle Mill Rd. Sandpoint, Id 83864</u>

OR the name and address of the registered agent in Idaho is:

5. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

<u>Randy N. Poelstra</u>	_____	_____
<u>Carla A. Poelstra</u>	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) Randy N. Poelstra

Typed Name Randy N. Poelstra

2) Carla A. Poelstra

Typed Name Carla A. Poelstra

3) _____

Typed Name _____

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Revised 01/2001

Secretary of State use only

IDAHO SECRETARY OF STATE
01/13/2006 05:00
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