

Typed Name

STATEMENT OF PARTNERSHIP **AUTHORITY**

FILED EFFECTIVE

2882

Web Form

(Instructions on back of application)

10 NOV -1 AM 9: 08

SECRE RY 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. 1. The name of the partnership is: Sulphur Lick Prospect Joint Venture NO 2 2. The street address of its chief executive office is: 8596 N Wayne Dr. Suite B Hayden, ID 83835 The street address of one (1) office in Idaho: 8596 N Wayne Dr. Suite B Hayden, ID 83835 4. The names and mailing addresses of all partners (attached sheets may be added): Name Address Kenneth T. Dorris 8596 N Wayne Dr. Suite B Hayden, ID 83835 8596 N Wayne Dr. Suite B Hayden, ID 83835 John Gentry **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: Kenneth T. Dorris John Gentry 6. Signature of at least 2 partners: Secretary of State use only Acorpyforms\gpforms\partnershipauth.p65 Typed Name Kenneth T. Dorris IDAHO SECRETARY OF STATE John Gentry Typed Name