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STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

2013 APR -5 PM 12:52

SECRETARY OF STATE
STATE OF IDAHO

The undersigned elects to be a Limited Liability Partnership, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-1001

1. The name of the limited liability partnership is: Snake River Hunting Dogs, LLP
2. If previously filed a statement of partnership, the name used in that statement is: _____
- The date it was filed with the Idaho Secretary of State's Office was: _____
3. The street address of the limited liability partnership's chief executive office is:
10728 State Hwy 78, Givens Hot Springs, ID 83641
4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: _____
5. The mailing address for future correspondence is: _____
10728 State Hwy 78, Givens Hot Springs, ID 83641
6. The above-named partnership elects to be a limited liability partnership.
7. Future effective date (optional): _____

8. Signature of at least 2 partners:

1) David A. Barkell

Typed Name David A Barkell

2) Angela D. Barkell

Typed Name Angela D Barkell

3) _____

Typed Name _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/05/2013 05:00
CK: 1352335 CT: 172099 BH: 1368182
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