

## STATEMENT OF QUALIFICATION OF FILED EFFECTIVE

06 APR 18 PM 2: 57

(Instructions on back of application)

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

1.	The name of the limited liability partnership is:
2.	If previously filed a statement of partnership, the name used in that statement is:  N/A
	The date it was filed with the Idaho Secretary of State's Office was: N/A
3.	The street address of the limited liability partnership's chief executive office is:  5602 Bitter Brush PL Caldwell, ID 83607
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: 5602 Bitter Brush PL Caldwell, ID 83607
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)

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