



0005530628

**STATE OF IDAHO**

Office of the secretary of state, Phil McGrane

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0005530628

Date Filed: 12/29/2023 1:55:30 PM

Statement of Qualification of Limited Liability Partnership	
Select one: Standard, Expedited or Same Day Service (see descriptions below)	Expedited (+\$40; filing fee \$140)
Limited Liability Partnership Name	
Type of Limited Liability Partnership	Limited Liability Partnership
Entity name	The Cut Above LLP
Limited Liability Partnership Designation	
<input checked="" type="checkbox"/> By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be a limited liability partnership.	
The complete street address of the principal office is:	
Principal Office Address	26 CARLSON AVE REXBURG, ID 83440
The mailing address of the principal office is:	
Mailing Address	26 CARLSON AVE REXBURG, ID 83440-1914
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	Registered Agent Taylor Seghetti Physical Address: 138 EAST 3RD NORTH SAINT ANTHONY, ID 83445 Mailing Address: 138 E 3RD N SAINT ANTHONY, ID 83445-1526
<input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.	
6. Signature of individual authorized by partners to sign:	
<i>Taylor Seghetti</i>	<i>12/29/2023</i>
Sign Here	Date
Job Title: Owner	

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