







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

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Statement of Qualification of Limited Liability Partnership Select one: Standard, Expedited or Same Day Service (see descriptions below) Limited Liability Partnership Name Type of Limited Liability Partnership Entity name Limited Liability Partnership Entity name Limited Liability Partnership Entity partnership Designation By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be limited liability partnership. The complete street address of the principal office is: Principal Office Address 618 PARK LN POCATELLO, ID 83201 The mailing address of the principal office is: Mailing Address Street address of an office in this State: Address None Registered Agent Name and Address Registered Agent Name and Address Registered Agent Tegan A Mooney	
Limited Liability Partnership Name Type of Limited Liability Partnership Entity name Limited Liability Partnership Entity name Limited Liability Partnership Entity name Limited Liability Partnership Entity name Limited Liability Partnership Limited Liability Partnership	
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Address None Registered Agent Name and Address Registered Agent Registered Agent Registered Agent	
Registered Agent Name and Address Registered Agent Registered Agent Registered Agent	
Registered Agent Registered Agent	
Physical Address:	
618 PARK LN	
POCATELLO, ID 83201	
Mailing Address:	
1671 E ELM ST POCATELLO, ID 83201-3271	
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:	
Tegan A Mooney 06/22/2022	
Sign Here Date	
Job Title: Partner	