



0006029030

**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

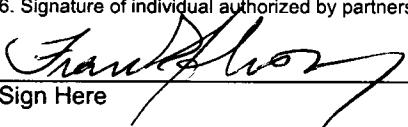
(208) 334-2301

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

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File #: 0006029030

Date Filed: 12/17/2024 2:38:32 PM

Statement of Qualification of Limited Liability Partnership Select one: Standard, Expedited or Same Day Service (see descriptions below)	
Standard (filing fee \$100)	
Limited Liability Partnership Name	
Type of Limited Liability Partnership	Professional Limited Liability Partnership
Entity name	JOHNSON FISTEL, PLLP
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.	
Profession	
The business is organized to practice the profession of:	Law
The complete street address of the principal office is:	
Principal Office Address	FRANK JOHNSON 1324 SHERMAN AVE. COEUR D'ALENE, ID 83814
The mailing address of the principal office is:	
Mailing Address	FRANK JOHNSON 1324 E SHERMAN AVE COEUR D ALENE, ID 83814-4042
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	REGISTERED AGENTS INC Commercial Registered Agent Physical Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854 Mailing Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854
<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:	
Sign Here	 12/18/24 Date
Job Title:	
Print & Mail Enclosures	
<input checked="" type="checkbox"/> I understand the document can ONLY be filed if the following items are included:	

00959-5071 12/23/2024 2:23 PM Received by Office of the Idaho Secretary of State



Payment in the amount of \$100.00 (if expedited, \$140; if 24 hour processing, \$200) - checks payable to the Secretary of State, signed and recently dated.

This filing form (submit within 30 days) **with the required signature(s)**.

If you are submitting a correction, return the correction letter with your updated document.

STATEMENT OF DOMESTICATION

1. Name, jurisdiction and type of the domesticating entity:

Name: JOHNSON FISTEL, LLP
Jurisdiction: CALIFORNIA
Type of Entity: LIMITED LIABILITY PARTNERSHIP

2. Name, jurisdiction and type of the domesticated entity:

Name: JOHNSON FISTEL, PLLP
Jurisdiction: IDAHO
Type of Entity: Professional Limited Liability Partnership

3. Effective date of domestication: Upon filing or
Date: _____

(This date may not be more than ninety (90) days after the date of filing.)

4. the domesticating entity is a foreign entity, and the domestication is approved in accordance with the law of its jurisdiction of organization.

5. the domesticated entity is a domestic filing entity and the text of its public organic document is shown in the document attached to this statement of domestication.

Signature of Domesticating Entity:



Frank Johnson
Print name