







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

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

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-FILED-

File #: 0004210130

Date Filed: 3/22/2021 10:36:17 AM

Lincite d Linkillia, Deutschaftle Name	
Limited Liability Partnership Name Type of Limited Liability Partnership	Limited Liability Partnership
	The house of Sunshine LLP
Entity name	The nouse of Sunshine LLP
Limited Liability Partnership Designation	
By checking this box and filing this document we liability partnership.	vith the Secretary of State, the partnership named herein elects to be a limited
The complete street address of the principal office is:	
Principal Office Address	6129 W POPLAR ST
	BOISE, ID 83704-7640
The mailing address of the principal office is:	
Mailing Address	6129 W POPLAR ST
	BOISE, ID 83704-7640
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	ALLAN R BOSCH
	Commercial Registered Agent
	Physical Address
	205 N 10TH ST 4TH FL BOISE, ID 83702
	Mailing Address
	205 N 10TH ST 4TH FL
	ALLAN R BOSCH BOISE, ID 83702
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:	
Ashley riddle	03/22/2021
Sign Here	Date
Job Title: Partner	