



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

2012 OCT 29 AM 11:41

SECRETARY OF STATE
STATE OF IDAHO

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

1. The name of the limited liability partnership is: 2C Properties LLP
2. If previously filed a statement of partnership, the name used in that statement is: _____
 The date it was filed with the Idaho Secretary of State's Office was: _____
3. The street address of the limited liability partnership's chief executive office is:
17575 Silk, Nampa, ID 83687
4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: Kotton Corder, 17575 Silk, Nampa, ID 83687
5. The mailing address for future correspondence is: 17575 Silk, Nampa, ID 83687
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) [Signature]
 Typed Name Reed M. Hymas
- 2) [Signature]
 Typed Name Kotton Corder
- 3) _____
 Typed Name _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
 10/29/2012 05:00
 CK: 1178372 CT: 172899 BH: 1345479
 I P 100.00 = 100.00 QUALIF LLP # 2

Web Form

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