

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP FLED EFFECTIV

(Instructions on back of application)

2014 MAY 30 AM 9: 21

	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: Boss Web Stores 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: 235 5. Karry Ln Idaha Falls 10 83402
4.	If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is:
	The mailing address for future correspondence is: 235 S. kawy Ln Jdaho Fills 10, 83402
6. <i>′</i>	The above-named partnership elects to be a limited liability partnership.
7.	Future effective date (optional):
8.	Signature of at least 2 partners:
	Typed Name Skylar Hillebran 5 Secretary of State use only 1040 SECRETARY OF STATE 05/30/2014 05:00
X	2) CK:1182 CT:279282 BH:1427007
	Typed Name AKE SHAW 16 20.00 = 20.00 CORP SUR #3

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