



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

2013 JUN 28 AM 8:50

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

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: Riverside Building 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:

9401 Riverside Dr, Garden City, ID 83714

4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is:

5. The mailing address for future correspondence is: 9401 Riverside Dr, Garden City, ID 83714

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)
Typed Name Mel Snider

2)
Typed Name Joy Snider

3) _____
Typed Name _____

Secretary of State use only

idocforms\qualip.p65 Revised 01/2001

IDAHO SECRETARY OF STATE
06/28/2013 05:00
CK: 8285 CT: 284817 DH: 1388114
1 @ 100.00 = 100.00 QUALIF LLP # 2

J2296