



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

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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	Limited Liability Partnership
Entity name	Syringa and Sage LLP
Limited Liability Partnership Designation	
By checking this box and filing this document with the Se limited liability partnership.	cretary of State, the partnership named herein elects to be a
The complete street address of the principal office is:	
Principal Office Address	319 N 3RD ST MCCALL, ID 83638
The mailing address of the principal office is:	
Mailing Address	132 WILDE PL MCCALL, ID 83638-5030
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	Registered Agent
	Mali M Baker Physical Address:
	655 BRADY DRIVE
	MCCALL, ID 83638
	Mailing Address:
	PO BOX 241 MCCALL, ID 83638-0241
I affirm that the registered agent appointed has consented. 6. Signature of individual authorized by partners to sign:	
Abigail Dellwo	03/05/2022
Sign Here	Date
-	
Job Title: Partner	