Printed Name: ___

Signature: _



FILED EFFECTIVE

2018 APR 23 PM 25 17

SECRETARY OF STATE

Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

		WE SEE TO THE	
1.	The name of the limited partnership:	<u>.</u>	
	TLC Suppliers, LP		
	(Remember to include the words "Limited Partnership," or the abbreviation L.P. (If the limited partnership is a <u>professional orbity</u> (as indicated in <i>1</i> (6) the name tetter "P" at the beginning of any of the permitted abbreviations.)		
2.	The complete street and mailing addresses of the limited partnership's principal office: 13613 Signorello St, Caldwell, ID 83607 (Street Address)		
	(Mailing ∧ddress, il dilterent)		
3.	Name and street address of the registered agent:		
	United States Corporation Agents, Inc 800 W. Main St. Suite 1100, Boise ID 83702		
	(Name) (Address)		
4.	Names and street addresses of each general partner.		
	Linda Thompson - 13613 Signorello St., Caldwell, ID 83607		
	(Nonic) (Address)		
	(Nume) (Address)		
	(Name) (Addres)		
5.	This limited partnership is a limited liability limited partne [II you cleak that your partnership is a thinked liability limited partnership, your partnership.		
6,	By entering one of the professions permitted by 30-21-901(b), Idaho Code, in the space below, and by filing this document with the Secretary of State, the partnership agrees that it is duly licensed or otherwise legally authorized to render the selected professional service, and that it is a professional limited partnership.		
	(If applicable, enter one of the permitted protessional services here. "Check instructions for list of permitted professions)		
7.	Signatures of all general partners:		
	nted Name: Linda Thompson		
Pri	nted Name:	Secretary of State use only	
Sig	mature: Linda - Thompson		
Pri	nted Name:	IDAHO SECRETARY OF STATE	
- ••		04/24/2018 05:00	
Sig	mature:	CK:296130 CT:167623 BH:1640106	

Rev. 08/2015

1@ 100.00 = 100.00 LTD PTR DM #2

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