



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

2005 APR -5 AM 8:43

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: 19 S & S LAND CO. LLP

2. If previously filed a statement of partnership, the name used in that statement is:

N/A

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:

2615 Toma Court Nampa, Idaho 83686

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

5. The mailing address for future correspondence is: 2615 Toma Court

Nampa, Idaho 83686

6. The above-named partnership elects to be a limited liability partnership.

7. Future effective date (optional): April 4, 2005

8. Signature of at least 2 partners:

1)

Bruce D. Skaug

2)

Harold J. Stone

3)

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE
04/05/2005 05:00
CK: 1333 CT: 67201 BH: 002718
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1 @ 20.00 = 20.00 EXPEDITE C # 3

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