0005742079

STATE OF IDAHO

Office of the secretary of state, Phil McGrane

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: $100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0005742079

Date Filed: 5/28/2024 8:11:08 PM

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	Nostalgic Reflections LLP
Limited Liability Partnership Designation	
☒ By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be a limited liability partnership.	
The complete street address of the principal office is:	
Principal Office Address	10365 W GALLAHAD AVE BOISE, ID 83704
The mailing address of the principal office is:	
Mailing Address	10365 W GALLAHAD AVE BOISE, ID 83704-5343
Street address of an office in this State:	
Address	10365 W GALLAHAD AVE BOISE, ID 83704
Registered Agent Name and Address	
Registered Agent	Registered Agent TAMMY Dennette SIMMONS Physical Address: 10365 W GALLAHAD AVE BOISE, ID 83704 Mailing Address: 10365 W GALLAHAD AVE BOISE, ID 83704-5343
☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.	

6. Signature of individual authorized by partners to sign:

Tammy Dennette Simmons — Sign Here

05/28/2024 — Date

Job Title: Partner

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