

## STATEMENT OF QUALIFICATION OF ILED EFFECTIVE LIMITED LIABILITY PARTNERS HIR 20 AM 8: 32

(Instructions on back of application)

SECRETARY OF STATE

The undersigned elects to be a Limited Liability Partnership, and subditts half of lowing information to the Secretary of State pursuant to Idaho Code § 53-3-1001

1.	The name of the limited liability partnership is: BYRAM PROPERTIES, 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:
	1192 S. 52 E., IDAHO FALLS, IDAHO 83401
4.	If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is:
•	The mailing address for future correspondence is: 1192 S. 52 E., IDAHO FALLS, IDAHO
	The above-named partnership elects to be a limited liability partnership.
7.	Future effective date (optional):
<b>.</b>	Signature of at least 2 partners:
	1) Lesse Primer 5 Secretary of State use only
	Typed Name Jesse Bypam
	2) Debeu Buran
	Typed Name Jesse Byram  2) Debie Byram  Typed Name Debbie Byram  3)  Typed Name  Typed Name  1 0 108.08 = 108.08