



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

09 FEB 23 AM 8:54

SECRETARY OF STATE
STATE OF IDAHO

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: Big D's Gun & Pawn 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:
352 N Main St, Pocatello, ID 83204
4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: _____
5. The mailing address for future correspondence is: 352 N Main St, Pocatello, ID 83204
6. The above-named partnership elects to be a limited liability partnership.
7. Future effective date (optional): _____

8. Signature of at least 2 partners:

1) [Signature]
Typed Name Joseph P. Morrell

2) [Signature]
Typed Name Dawn L. Morrell

3) _____
Typed Name _____

Secretary of State use only

51836

IDAHO SECRETARY OF STATE
02/23/2009 05:00
CK: 3124 CT: 234376 DN: 1158844
1 @ 100.00 = 100.00 QUALIF LLP # 2

g:\chop\me\qualif.p65 Revised 01/2001

Web Form