FILED/EFFECTIVE



Typed Name

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

FEB 22 2 47 PM '01

(Instructions on back of application)

	SECRUTE TAYE
	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:Devco_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: 950 N. Cole Road, Boise, ID 83704
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: P.O. Box 1228, Boise ID 83701
6.	The above-named partnership elects to be a limited liability partnership.
7.	Future effective date (optional):
8.	Signature of at least 2 partners:
	Typed Name x A C: Secretary of State use only 1DANO SECRETARY OF STATE
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	If mist TP 110 M 4
	Typed Name H. Glenn Scott 9 1 9 199.99 9 9 199.99 9 199.99

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