





## 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

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Statement of Qualification of Limited Liability Partnership Select one: Standard, Expedited or Same Day Service (s descriptions below)	ee Standard (filing fee \$100)
Limited Liability Partnership Name	
Type of Limited Liability Partnership	Limited Liability Partnership
Entity name	Inez Joshua Limited Liability Partnership
Limited Liability Partnership Designation	
By checking this box and filing this document with the limited liability partnership.	Secretary of State, the partnership named herein elects to be a
The complete street address of the principal office is:	
Principal Office Address	1569 S ROVIAN
	BOISE, ID 83705
The mailing address of the principal office is:	
Mailing Address	1569 S ROVIAN ST
	BOISE, ID 83705-4269
Street address of an office in this State:	
Address	1569 S ROVIAN
	BOISE, ID 83705
Registered Agent Name and Address	
Registered Agent	Registered Agent
	Megan C Borkowski
	Physical Address: 6437 S HORNBEAM PL.
	BOISE, ID 83716
	Mailing Address:
	6437 S HORNBEAM PL
	BOISE, ID 83716-7103
☑ I affirm that the registered agent appointed has conse	ented to serve as registered agent for this entity.
6. Signature of individual authorized by partners to sign:	
Rebecca I Brollier	03/02/2023
Sign Here	Date