

FILED EFFECTIVE



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

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

2007 MAY -8 AM 8:20

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: ALL AMERICAN WELDING AND FABRICATION 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:

7344 W MACAW LANE RATHDRUM, ID 83858

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: _____

7344 W MACAW LANE RATHDRUM, ID 83858

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) Michael J Baker

Typed Name MICHAEL BAKER

2) Ronald M McMillan

Typed Name RONALD MCMILLAN

3) _____

Typed Name _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
05/08/2007 05:00
CK: 3314 CT: 213155 BH: 1052317
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Web Form

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