







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney STATEMENT OF QUALIFICATION OF LIMITED **LIABILITY PARTNERSHIP**

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

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Limited Liability Partnership Name	Limited Liability Dortnership
Type of Limited Liability Partnership	Limited Liability Partnership
Entity name	Solterr, Limited Liability Partnership
Limited Liability Partnership Designation	
By checking this box and filing this document we liability partnership.	with the Secretary of State, the partnership named herein elects to be a limited
The complete street address of the principal office is:	
Principal Office Address	6249 W COHIBA LN
	BOISE, ID 83703
The mailing address of the principal office is:	
Mailing Address	6249 W COHIBA LN
	BOISE, ID 83703-2848
Street address of an office in this State:	
Address	6249 W COHIBA LN
	BOISE, ID 83703
Registered Agent Name and Address	
Registered Agent	BRIAN MCKAY
	Registered Agent
	Physical Address
	6249 W COHIBA LN
	BOISE, ID 83703
	Mailing Address
☑ I affirm that the registered agent appointed has	s consented to serve as registered agent for this entity.
Signature of individual authorized by partners to sign:	
o. Olgitalule of individual authorized by partities to sign.	
Brian McKay	09/21/2020
Sign Here	Date
Job Title: Partner	