

STATEMENT OF QUALIFICATION OF ILED EFFECTIVE LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

2007 JUN 25 AM 9: 53

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

	Snack Central LLP
. The name of the limited liability partnership is:	
. If previously filed a statement of partnership,	
MA	Office was
The date it was filed with the Idaho Secretar	y of State's Office was
The street address of the limited liability part	nership's chief executive office is:
12348 W Auckland Street, Boise, ID 83709	
If the partnership does not have an office in the registered agent is:	the state of Idaho, the name and address of
the registered agent is:	
 5. The mailing address for future corresponde 6. The above-named partnership elects to be 	a limited liability partnership.
7. Future effective date (optional): المالة	007
7. Future ellectivo data (opi	
8. Signature of at least 2 partners: 1) Lon Long Long Ametropa	Secretary of State use only
Typed Name Don Armstrong 2) Caroline Armstrong Typed Name Caroline Armstrong 3)	IDAHO SECRETARY OF STATE 8 06/25/2007 05:200 CK: 1024 CT: 214753 BH: 1062105 1 108.00 = 100.00 QUALIF LLP 1
Typed Name	