

FILED EFFECTIVE



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

2007 APR 11 PM 1:14

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

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: SOLORIO'S CONSTRUCTION, 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:
861 W. TROPICAL DR. NAMPA, ID 83686
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: 861 W. TROPICAL DR. NAMPA, ID 83686
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) *Rigoberto Espinoza*
Typed Name RIGOBERTO ESPINOZA
- 2) *Manuel S. Espinoza*
Typed Name MANUEL S. ESPINOZA
- 3) _____
Typed Name _____

Secretary of State use only

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Web Form

IDAHO SECRETARY OF STATE
04/12/2007 05:00
CK: 1485 CT: 192263 BH: 1046245
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