



**STATEMENT OF QUALIFICATION OF
LIMITED LIABILITY PARTNERSHIP**

(Instructions on back of application)

P06 JAN 20 AM 9:23

SECRETARY OF STATE
I submits the following
53-3-1001

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: JV STONE 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:

16646 N GRAND PINE WAY, NAMPA, IDAHO 83651

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: _____
16646 N GRAND PINE WAY NAMPA IDAHO 83651

16646 N GRAND PINE WAY, NAMPA, IDAHO 83651

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) JESUS VALDIVIA

Typed Name JESUS VALDIVIA

2) Cefalina Morfin

Typed Name CATALINA MORFIN MADRIGAL

3)

Typed Name

Secretary of State use only

8. COMMUNALISM

IDaho SECRETARY OF STATE
01/20/2006 05:00
CK: 8491518990 CT: 196136 BH: 933221
1 B 100.00 = 100.00 QUALIF LLP # 2

Web Form