

FILED EFFECTIVE



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

06 MAY 17 PM 2:02

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

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: LAGUNA'S PAINTING 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:
204 SOUTH BRUNEAU HWY MARSING ID 83639
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: _____
204 SOUTH BRUNEAU HWY MARSING ID 83639
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) Nicolas Lagunas
 Typed Name NICOLAS LAGUNAS

2) Hipolito Blas Garcia
 Typed Name HIPOLITO BLAS GARCIA

3) _____
 Typed Name _____

Secretary of State use only

01/2001
 Revised
 05/17/2006

J 1444
 IDAHO SECRETARY OF STATE
 05/17/2006 05:00
 CK: CASH CT: 200402 RH: 953254
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