



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Title 30, Chapters 21 and 23, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2018 JUN 27 AM 8:30

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is:

ALLMED Consulting Group, LLP

(Remember to include the words "limited liability partnership," "Registered Limited Liability Partnership," or the permitted abbreviations)
(If the limited liability partnership is a professional entity (as indicated in #7) the name may include the word "professional" before the word "limited," or the letter "P" at the beginning of any of the permitted abbreviations.)

2. The street address of the limited liability partnership's principal office is:

9428 W Fairview Ave

(Street Address)

Boise, Idaho 83704

(Mailing Address, if different)

3. The street address of an office in this state, if any (if different from #2):

(Street Address)

4. Name and street address of the registered agent:

Ralph R. Teeter

10199 W Carlton Bay, Garden City, Idaho 83714

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

9428 W Fairview Ave, Boise, Idaho 83704

(Address)

6. By filing this document with the Secretary of State, the partnership named herein elects to be a limited liability partnership.
7. By entering one of the professions permitted by 30-21-901(b), Idaho Code, in the space below, and by filing this document with the Secretary of State, the partnership agrees that it is duly licensed or otherwise legally authorized to render the selected professional service, and that it is a professional limited liability partnership.

(If applicable, enter one of the permitted professional services here. *Check instructions for list of permitted professions)

8. Signatures of all partners:

Printed Name: **Jacob Bernhardt**

Signature: _____

Printed Name: **Ralph R. Teeter**

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/27/2018 05:00

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8. Continued

Printed Name: Alexander J. Johnston

Signature: 

Printed Name: Brandon Brevig

Signature: 