APPLICATION FOR REGISTRATION OF LIMITED LIABILITY PARTNERSHIP

The undersigned partnership hereby applies for registration as a



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(Instructions on back of application)

Partnership, and submits the following information pursuant to section 53-343A, I.C. 1. The name of the partnership is Country Classics Drywall and Remodeling 2. It's principal office is located at 612 E. 3rd Street Post Falls, Idaho 83854 3. It's registered office in Idaho is located at 612 E. 3rd. Street Post Falls. Idaho 83854 ,and the name of the reg agent at that address is _____ William H. McCall 4. The partnership is organized in the state of ____ Idaho 5. The nature of it's business is Drywall Construction and RemodelTnc 6. The name(s) and address(es) of at least one partner: Name <u>Address</u> William H. McCall P.O. Box 2114 Post Falls, ID. 83854 Veree L. McCall P.O. Box 2114 Post Falls, ID. 83854 Other matters (optional): 8. Signature(s) of at least one partner listed CK: 3417 CT: 87527 BH: 40613 in item 6. 1 0 198.00 = 190.00 ORGAN LLC