







## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

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Statement of Qualification of Limited Liability Partnership Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)	
Limited Liability Partnership Name		
Type of Limited Liability Partnership	Limited Liability Partnership	
Entity name	Mite E Vape LLP	
Limited Liability Partnership Designation		
By checking this box and filing this document with the Secretiability partnership.	etary of State, the partnership name	ed herein elects to be a limited
The complete street address of the principal office is:		
Principal Office Address	2275 S STATELINE RD DRIGGS, ID 83422	
The mailing address of the principal office is:		
Mailing Address	PO BOX 8 DRIGGS, ID 83422-0008	
Street address of an office in this State:		
Address	None	
Registered Agent Name and Address		
Registered Agent	Registered Agent	
	Crystal Hansen Physical Address:	
	2275 S. STATELINE RD	
	DRIGGS, ID 83422	
	Mailing Address:	
	PO BOX 8	
	DRIGGS, ID 83422-0008	
I affirm that the registered agent appointed has consented t	o serve as registered agent for this	entity.
6. Signature of individual authorized by partners to sign:		
Scott Hansen		12/27/2021
Sign Here		Date