







## 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

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-FILED-

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Statement of Qualification of Limited Liability Partnership	
Select one: Standard, Expedited or Same Day Service (see descriptions below)	Expedited (+\$40; filing fee \$140)
Limited Liability Partnership Name	
Type of Limited Liability Partnership	Limited Liability Partnership
Entity name	The Sober Life LLP
Limited Liability Partnership Designation	
By checking this box and filing this document with the Seclimited liability partnership.	cretary of State, the partnership named herein elects to be a
The complete street address of the principal office is:	
Principal Office Address	2484 N LAUGHRIDGE AVE MERIDIAN, ID 83646
The mailing address of the principal office is:	
Mailing Address	2484 N LAUGHRIDGE AVE MERIDIAN, ID 83646-5782
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	Registered Agent Joshua D Breshears
	Physical Address:
	2484 N LAUGHRIDGE AVE
	MERIDIAN, ID 83646
	Mailing Address:
	2484 N LAUGHRIDGE AVE MERIDIAN, ID 83646-5782
☑ I affirm that the registered agent appointed has consented.	d to serve as registered agent for this entity.
6. Signature of individual authorized by partners to sign:	
Joshua Breshears	05/02/2022
	05/02/2022
Sign Here	Date
Job Title: Partner	
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