



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

2005 JUL 14 05:00

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

1. The name of the limited liability partnership is: JM3 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: 07/13/05

3. The street address of the limited liability partnership's chief executive office is:

410 South Orchard, Ste 116, Boise, ID 83706

4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: Mel Snider, 410 South Orchard, Ste 116, Boise, ID 83706

5. The mailing address for future correspondence is: 410 South Orchard, Ste 116, Boise, ID 83706

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) *Mel Snider*
Typed Name Mel Snider

2) _____
Typed Name Michael Virden

3) *[Signature]*
Typed Name _____

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Secretary of State use only

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07/14/2005 05:00
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