







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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Limited Liability Partnership Name Entity name	MV Farms LLP
2. Limited Liability Partnership Designation	
By checking this box and filing this document liability partnership.	ment with the Secretary of State, the partnership named herein elects to be a limited
3. The complete street address of the principal office is:	
Principal Office Address	JOSHUA HAZEN 4074 QUAIL RIDGE DR KIMBERLY, ID 83341
4. The mailing address of the principal office is:	
Mailing Address	JOSHUA HAZEN 4074 QUAIL RIDGE DR KIMBERLY, ID 83341-4009
5. Street address of an office in this State:	
Address	JOSHUA HAZEN 4074 QUAIL RIDGE DR KIMBERLY, ID 83341
6. Registered Agent Name and Address	
Registered Agent	WARE & ASSOC Registered Agent
	Physical Address
	149 3RD AVE E TWIN FALLS, ID 83303
	Mailing Address
6. Signature of individual authorized by partners to sign:	
Jeffrey Brewster	04/10/2019
Sign Here	Date
Signer's Title: Owner Partner	