



# STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

2003 JUL 25 AM 8:39

FILED EFFECTIVE

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, OF STATE

STATE OF IDAHO

Two The Letter **LLP**

1. The name of the limited liability partnership is: \_\_\_\_\_

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: \_\_\_\_\_

3. The street address of the limited liability partnership's chief executive office is:  
1718 S RUSHMORE PLACE, BOISE, IDAHO, 83709

4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: \_\_\_\_\_

5. The mailing address for future correspondence is:  
1718 S RUSHMORE PLACE, BOISE, IDAHO, 83709

IDAHO SECRETARY OF STATE  
07/25/2003 05:00  
CK: 2107 CT: 171792 BH: 692957  
1 @ 50.00 = 50.00 QUALIF LLP # 2

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) Jennifer Reed  
Typed Name Jennifer Reed

2) Brandy D Wahlers  
Typed Name Brandy D Wahlers

3) \_\_\_\_\_  
Typed Name \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
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