

(Instructions on back of application)

08 DEC 24 AM 11:59

33-1001 SECRETARY OF STATE
STATE OF IDAHO

- 2. If previously filed a statement of partnership, the name used in that statement is:**

N/A

The date it was filed with the Idaho Secretary of State's Office was: N/A

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

16828 S. Wessex Lane, Nampa, ID 83687

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

5. The mailing address for future correspondence is: P.O. Box 631, Star, ID 83669

- 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) Gary Mello
Typed Name: Gary Mello

2) Mamm. Persall

Typed Name Maria V. Poisall

3)

Typed Name

Secretary of State use only

01/2001

Web Form

IDAHO SECRETARY OF STATE
12/26/2008 05:00
CK: CASH CT: 232544 BN: 1149657
1 @ 100.00 = 100.00 QUALIF LID # 2

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