



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP FILED EFFECTIVE

(Instructions on back of application)

08 DEC 24 AM 11:59

The undersigned elects to be a Limited Liability Partnership, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-1001

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: MP Capital Investments, LLP

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) *Maria V. Poisall*
Typed Name Maria V. Poisall

3) _____
Typed Name _____

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Secretary of State use only

Web Form

IDAHO SECRETARY OF STATE
12/26/2008 05:00
CK: CRSH CT: 232544 DN: 1149657
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