

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

06 FEB 24 PM 2: 20

The undersigned elects to be a Limited Liability Partnership, and submits the following TATE information to the Secretary of State pursuant to Idaho Code § 53-3-1894 TE OF IDAHO

1.	The name of the limited liability partnership is: Fieldstone Masonry L.L.P
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: 1710 W Claire dr. Meridian Id 83642
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: 1710 W Claire dr Meridian Id 83642
6.	The above-named partnership elects to be a limited liability partnership.
7.	Future effective date (optional):
8.	Signature of at least 2 partners:
	Typed Name Tad Porter 3) Typed Name Typed Name