

FILED EFFECTIVE

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

11 SEP -2 AM 9:10

The undersigned elects to be a Limited Liability Partnership, a
information to the Secretary of State pursuant to Idaho Code § 55 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: NORMAN CATTLE AND LAND LLP
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:
33 WEST MAIN ST. SAINT ANTHONY IDAHO 83445
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: _____
33 WEST MAIN ST. SAINT ANTHONY IDAHO 83445
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)

Typed Name

Joshua H. Norman

2)

Typed Name

High Norman

3)

Typed Name

Secretary of State use only

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Web Form

IDAHO SECRETARY OF STATE
09/02/2011 05:00
CK: NO CHECK # CT: 262090 BH: 1200923
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