



# STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

2013 NOV 25 AM 9:41

(Instructions on back of application)

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

1. The name of the limited liability partnership is: Kosbow, LLP

2. If previously filed a statement of partnership, the name used in that statement is:  
not applicable.

The date it was filed with the Idaho Secretary of State's Office was: not applicable

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

643 Deon Street, Burley, Idaho 83318

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: 643 Deon Street, Burley, Idaho 83318

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) [Signature]

Typed Name Brian Kossman

2) [Signature]

Typed Name Reid D. Bowen

3) \_\_\_\_\_

Typed Name \_\_\_\_\_

Secretary of State use only

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11/25/2013 05:00  
CX: 13624 CT: 15366 BH: 1399367  
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Web Form

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