



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP FILED EFFECTIVE

(Instructions on back of application)

05 JAN 18 PM 4: 52

The undersigned elects to be a Limited Liability Partnership, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-901.

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: E & G Drywall, 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:

5646 W Dorian Lane, Boise ID 83705

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: PO Box 595 Fruitland, ID 83619

Edward Pierce

6. The above-named partnership elects to be a limited liability partnership.

7. Future effective date (optional): January 18, 2005

8. Signature of at least 2 partners:

1) Edward A Pierce

Typed Name Edward Anthony Pierce

2) Gus Philip Hood

Typed Name Gus Philip Hood

3) _____

Typed Name _____

9 complianceupdate.pdf Revised 01/2001

Secretary of State use only

IDAHO SECRETARY OF STATE
01/19/2005 05:00
CK: 3944 CT: 185311 BH: 787893
1 @ 100.00 = 100.00 QUALIF LLP # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

J1237