



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(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: MJ Investments, L.L.P.
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:
20991 Fish Road, Wilder, Idaho 83676
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: 20991 Fish Road, Wilder, Idaho 83676
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) Maria G. Hernandez
Typed Name MARIA G. HERNANDEZ

2) Josie G. Hernandez
Typed Name JOSIE G. HERNANDEZ

3) _____
Typed Name _____

FILED/EFFECTIVE
02 APR 18 AM 8:43

SECRETARY OF STATE
STATE OF IDAHO

Secretary of State use only

IDAHO SECRETARY OF STATE
04/18/2002 05:00
CK: 5803 CT: 158391 DH: 468169
1 @ 100.00 = 100.00 QUALIF LLP # 2

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Web Form

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