



0005893762

**STATE OF IDAHO**

Office of the secretary of state, Phil McGrane

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

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Statement of Qualification of Limited Liability Partnership

Select one: Standard, Expedited or Same Day Service (see descriptions below) Expedited (+\$40; filing fee \$140)

Limited Liability Partnership Name

Type of Limited Liability Partnership

Limited Liability Partnership

Entity name

CAB Distributing, LLP

Limited Liability Partnership Designation

☒ By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be a limited liability partnership.

The complete street address of the principal office is:

Principal Office Address

ELIZABETH WALKER
1735 S ASH PARK LN
BOISE, ID 83709

The mailing address of the principal office is:

Mailing Address

ELIZABETH WALKER
1735 S ASH PARK LN
BOISE, ID 83709-2701

Street address of an office in this State:

Address

ELIZABETH WALKER
1735 S ASH PARK LN
BOISE, ID 83709

Registered Agent Name and Address

Registered Agent

Registered Agent
Elizabeth Walker
Physical Address:
1735 S ASH PARK LN
BOISE, ID 83709
Mailing Address:
1735 S ASH PARK LN
BOISE, ID 83709-2701☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

6. Signature of individual authorized by partners to sign:

Elizabeth Walker

Sign Here

09/08/2024

Date

Job Title: Partner

B0946-3523 09/08/2024 3:36 PM Received by Office of the Idaho Secretary of State