



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

06 APR 12 PM 3:58

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

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: M. Q. M. Auto Sales LLP

2. If previously filed a statement of partnership, the name used in that statement is:

M. Q. M. Auto Sales LLP

The date it was filed with the Idaho Secretary of State's Office was: March 31, 00

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

202 3rd St, So. Nampa, Id. 83651

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: 202 3rd St, So. Nampa, Idaho. 83651

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) Daniel L. McConnell
Typed Name DANIEL L. MCCONNELL

2) Matthew Quinn McConnell
Typed Name Matthew Quinn McConnell

3) _____
Typed Name _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/12/2006 05:00
CK: 6050 CT: 190440 BH: 940855
1 @ 100.00 = 100.00 QUALIF LLP # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3
1 @ 20.00 = 20.00 CORP SUR # 4

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