

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

SECTION . 3 PM 4:41

information to the Secretary of State pursuant to Idaho Code § 53-3-1001 1. The name of the limited liability partnership is: Alpine Real Estate 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: 6149 N. Meeker Place #250 Boise, ID 83713 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: 6149 N. Meeker Place #250 Boise, ID 83713 6. The above-named partnership elects to be a limited liability partnership. 7. Future effective date (optional): Secretary of State use only Secretary of State use only Typed Name Matthew P. Grow Secretary of State use only Typed Name Matthew P. J. Larson	T	abburginou)	1 4:4
1. The name of the limited liability partnership is: Alpine Real Estate 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: 6149 N. Meeker Place #250 Boise, ID 83713 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: 6149 N. Meeker Place #250 Boise, ID 83713 6. The above-named partnership elects to be a limited liability partnership. 7. Future effective date (optional): 3. Signature of at least 2 partners: 1) Habby F. March Secretary of State use only Typed Name Matthew P. Grow 2) Schall Hamman Stephen J. Larson	I he undersigned elects to be a Limited Liab information to the Secretary of State pursu	1 m	57.47E
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: 6149 N. Meeker Place #250 Boise, ID 83713 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: 6149 N. Meeker Place #250 Boise, ID 83713 6. The above-named partnership elects to be a limited liability partnership. 7. Future effective date (optional): Signature of at least 2 partners: 1)			<i>-</i>
3. The street address of the limited liability partnership's chief executive office is: 6149 N. Meeker Place #250 Boise, ID 83713 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: 6149 N. Meeker Place #250 Boise, ID 83713 6. The above-named partnership elects to be a limited liability partnership. 7. Future effective date (optional): Signature of at least 2 partners: 1)	2. If previously filed a statement of partnership	p, the name used in that statement is:	
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: 6149 N. Meeker Place #250 Boise, ID 83713 The above-named partnership elects to be a limited liability partnership. Future effective date (optional): Signature of at least 2 partners: 1)	The date it was filed with the Idaho Secreta	ary of State's Office was:	
5. The mailing address for future correspondence is: 6149 N. Meeker Place #250 Boise, ID 83713 The above-named partnership elects to be a limited liability partnership. Future effective date (optional): Signature of at least 2 partners: 1) Typed Name Matthew P. Grow 2) Typed Name Matthew P. Grow Typed Name Stephen J. Larson	3. The street address of the limited liability part		
Typed Name Matthew P. Grow Typed Name Stephen J. Larson 6149 N. Meeker Place #250 Boise, ID 83713 6150 Secretary of State use only	If the partnership does not have an office in t the registered agent is:	the state of Idaho, the name and address o	of
Signature of at least 2 partners: 1) Marke P. Xim Typed Name Matthew P. Grow 2) Schen Jame Typed Name Stephen J. Larson 3)	. The mailing address for future correspondenc	Ce is: 6149 N. Meeker Place #250 Boise, ID 8371:	3
1) Marke P. Shin Typed Name Matthew P. Grow 2) Sechen January Typed Name Stephen J. Larson 88	The above-named partnership elects to be a lire. Future effective date (optional):	imited liability partnership.	
1 0 100.00 = 100.00 DH: 779781	1) Nather P. Show Typed Name Matthew P. Grow 2) Schen Jame Typed Name Stephen J. Larson 3)	IDAHO SECRETARY OF STATE 12/03/2004 05:0 CK: 7265 CT: 89349 BH: 7797	t 1