







## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney 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

For Office Use Only

## -FILED-

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Limited Liability Partnership Name Entity name	GROFUNK LLP
2. Limited Liability Partnership Designation	
By checking this box and filing this document with t liability partnership.	he Secretary of State, the partnership named herein elects to be a limited
3. The complete street address of the principal office is:	
Principal Office Address	5485 N PIERCE PARK LN 2018 BOISE, ID 83714
4. The mailing address of the principal office is:	
Mailing Address	PO BOX 241 WILDER, ID 83676-0241
5. Street address of an office in this State:	
Address	5485 N PIERCE PARK LN APT 201 BOISE, ID 83714-7827
6. Registered Agent Name and Address	
Registered Agent	CARL FUNK Registered Agent
	Physical Address
	5485 N PIERCE PARK PL #201 BOISE, ID 83714
	Mailing Address
6. Signature of individual authorized by partners to sign:	
Carl Funk	11/27/2018
Sign Here	Date
Signer's Capacity: Partner	