

STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

FILED

(Instructions on back of application)

(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

-	he name of the limited liability partnership is:
lf	previously filed a statement of partnership, the name used in that statement is: FREDERICKSEN, WILLIAMS & MESERVY - ATTORNEYS AT LAW
T	he date it was filed with the Idaho Secretary of State's Office was: 8/13/99
T	he street address of the limited liability partnership's chief executive office is:
_	117 South Adams, Jerome, Idaho 83338
li tl	the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: $\frac{1}{N}$
- Т	The mailing address for future correspondence is: Fredericksen, Williams & Meservy, 1
_	PO Box 168, Jerome, Idaho 83338
T	
	he above-named partnership elects to be a limited liability partnership.
	he above-named partnership elects to be a limited liability partnership.
	he above-named partnership elects to be a limited liability partnership.
	he above-named partnership elects to be a limited liability partnership. Future effective date (optional):
F .	he above-named partnership elects to be a limited liability partnership. Future effective date (optional):
F	he above-named partnership elects to be a limited liability partnership. Future effective date (optional):
F	he above-named partnership elects to be a limited liability partnership. Future effective date (optional):